Calendar No. 153

102D CONGRESS *1st Session*	SENATE	REPORT 102-104

DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION AND RELATED AGENCIES APPROPRIATION BILL, 1992

JULY 11 (legislative day, JULY 8), 1991.—Ordered to be printed

Mr. HARKIN, from the Committee on Appropriations,
submitted the following

REPORT

[To accompany H.R. 2707]

The Committee on Appropriations, to which was referred the bill (H.R. 2707) making appropriations for the Departments of Labor, Health and Human Services, and Education and related agencies for the fiscal year ending September 30, 1992, and for other purposes, reports the same to the Senate with various amendments and presents herewith information relative to the changes recommended.

Amount of budget authority

Amount of House bill	$203,998,247,000
Amount of Senate bill over House bill	+322,768,000
Total bill as reported to Senate	204,321,015,000
Amount of adjusted appropriations, 1991	183,040,909,000
Budget estimates, 1992	200,611,414,000
The bill as reported to the Senate:	
Over the adjusted appropriations for 1991	+21,280,106,000
Over the budget estimates for 1992	+3,709,601,000

S183-6

CONTENTS

Page

Budget estimates 4

Title I—Department of Labor:
  - Employment and Training Administration 7
  - Labor-Management Services 17
  - Pension Benefit Guaranty Corporation 18
  - Employment Standards Administration 19
  - Occupational Safety and Health Administration 22
  - Mine Safety and Health Administration 24
  - Bureau of Labor Statistics 25
  - Departmental management 26
  - Office of the Inspector General 28

Title II—Department of Health and Human Services:
  - Acquired immune deficiency syndrome 36
  - Health Resources and Services Administration 38
  - Centers for Disease Control 58
  - National Institutes of Health 78
  - Alcohol, Drug Abuse, and Mental Health Administration 152
  - Office of the Assistant Secretary for Health 163
  - Health Care Financing Administration 167
  - Social Security Administration 174
  - Administration for Children and Families 178
  - Departmental management 199

Title III—Department of Education:
  - Compensatory education for the disadvantaged 203
  - Impact aid 207
  - School improvement programs 210
  - America 2000 excellence in education 218
  - Bilingual, immigrant and refugee education 218
  - Special education 220
  - Rehabilitation services and handicapped research 226
  - Special institutions for persons with disabilities 232
  - National Technical Institute for the Deaf 233
  - Gallaudet University 233
  - Vocational and adult education 234
  - Student financial assistance 241
  - Guaranteed student loans 244
  - Higher education 247
  - Howard University 256
  - College housing and academic facilities loans 257
  - Education research, statistics, and improvement 258
  - Libraries 267
  - Departmental management 269
  - Office for Civil Rights 270
  - Office of the Inspector General 271

Title IV—Related agencies:
  - ACTION 272
  - Corporation for Public Broadcasting 275
  - Federal Mediation and Conciliation Service 276
  - Federal Mine Safety and Health Review Commission 276
  - National Commission on Acquired Immune Deficiency Syndrome 277
  - National Commission on Libraries and Information Science 277
  - National Commission to Prevent Infant Mortality 277
  - National Council on Disability 278
  - National Labor Relations Board 278
  - National Mediation Board 278

Page
Title IV—Related agencies—Continued
  Occupational Safety and Health Review Commission 279
  Physician Payment Review Commission 279
  Prospective Payment Assessment Commission 280
  Railroad Retirement Board 280
  Soldiers' and Airmen's Home 282
  U.S. Institute of Peace 282
  U.S. Naval Home 283
Budgetary impact of bill 283
Compliance with standing rules of the Senate 284
Comparative statement of new budget authority 284

SUMMARY OF BUDGET ESTIMATES AND COMMITTEE RECOMMENDATIONS

For fiscal year 1992, the Committee recommends total budget authority of $204,321,015,000 for the Department of Labor, Health and Human Services, Education, and Related Agencies. Of this amount, $27,944,992,000 is for subsequent year advances. These figures represent total funding in the bill and are not adjusted for advances from prior years as are the current year totals used for section 602(b) scoring.

ALLOCATION CEILING

Consistent with Budget Committee scorekeeping, the recommendations result in discretionary outlays of $57,812,000,000, the full amount of the subcommittee discretionary allocation, pursuant to section 602(b) of the Congressional Budget Act of 1974, as amended.

The outlay ceiling provided the subcommittee is a full $1,000,000,000 below the level needed to maintain current services and $87,000,000 below the level that would represent a hard freeze. A higher ceiling would have permitted the subcommittee to more fully meet the approximately 1,250 separate requests received from Members of the Senate.

HIGHLIGHTS OF THE BILL

Job training programs.—$4,201,508,000 is included for Labor Department training and employment services. This includes $576,996,000 for dislocated worker assistance, including $50,000,000 to implement the new Clean Air Transition Assistance Program. The $927,497,000 recommended for the Job Corps represents nearly a 7-percent increase over current funding. Overall, job training programs represent an increase of $123,557,000 over the enacted fiscal 1991 level.

Employment of older Americans.—$400,000,000 is included for the employment of older Americans. This program provides jobs for low-income persons aged 55 and over in a variety of community service activities. This is $57,188,000 more than the President's request, and $9,640,000 over the 1991 level.

State employment security agencies.—$3,203,185,000 maintains current services for job service offices and unemployment insurance service operations; $20,000,000 is included to continue the Targeted Jobs Tax Credit Program, and $12,500,000 maintains the current level for automation of employment offices.

Black lung.—$917,948,000 is included for Labor Department black lung benefit payments and administrative costs, the full amount of the request.

National Institutes of Health.—$8,959,533,000 is included for the National Institutes of Health, a $682,794,000, increase over last year. This permits 6,040 new grants to be funded in fiscal year 1992, the highest level since 1988.

Alzheimer's.—The Committee has included $271,000,000 for Alzheimer's disease research and care, $30,000,000 more than requested by the administration.

Women's health.—The Committee has included an increase of $65,000,000 in the National Institutes of Health for expanded breast, ovarian, and cervical cancer research, as well as additional trials relating to osteoporosis and other disorders which disproportionately affect women. The Committee also establishes an Office of Women's Health Research at ADAMHA to coordinate women's research and service initiatives and has provided $50,000,000 for the CDC Breast and Cervical Cancer Screening Program.

Infant mortality.—The Committee has included an increase of $253,379,000 for programs to reduce infant mortality in communities across the Nation. The Committee's infant mortality initiative fully funds the maternal and child health block grant ($686,000,000), and includes $75,000,000 for a targeted program of assistance.

Immunization.—The Committee has provided $277,845,000 for immunization, an increase of $20,000,000 over the administration request and $60,314,000 over fiscal year 1991.

Lead poisoning prevention.—The Committee has included an increase of $17,030,000 over fiscal year 1991, to provide a total of $25,000,000 for this program in fiscal year 1992.

AIDS.—$1,933,751,000 is included for public health service program activities associated with aids. This is a 6.5-percent increase over the levels provided in 1991 and permits a $68,612,000 increase for Ryan White AIDS care and a $22,000,000 increase for pediatric AIDS activities.

Rural health.—Over $240,000,000 is provided for rural health initiatives such as the National Health Service Corps, essential access community hospitals, rural health transition grants, rural health outreach grants, and rural health research.

Health professions and nursing education.—The Committee has fully restored funding for health professions and nursing education programs. The sum of $261,199,000 is provided to train essential health care providers.

Homeless.—The Committee recommends $178,000,000 for programs authorized under the Stuart B. McKinney Act. This is $72,000,000 over the request, $45,000,000 over the 1991 level, and $10,000,000 the level provided by the House.

Drug and alcohol treatment and research.—Over $3,000,000,000 is provided for treatment and research programs to combat substance abuse. The Committee has increased funding over the administration's request by over $150,000,000, and has provided substantial increases in funds to treat pregnant addicts and their infants, for the alcohol, drug abuse, and mental health services block grant, and for community prevention grants.

Low-Income Home Energy Assistance Program.—$1,600,000,000 is provided for the Low-Income Home Energy Assistance Program, including $1,300,000,000 in the regular program and $300,000,000 in an emergency fund.

Child care.—The Committee recommends the fully authorized level of $825,000,000 for child care block grants to States, and rejects the $144,925,000 rescission proposed by the House.

Community services.—The Committee has included $370,000,000 for the community services block grant, a 6-percent increase over the current level; the administration had proposed elimination of this program.

Chapter 1.—The Committee recommendation provides $5,751,750,000 for chapter 1, or $194,000,000 more than the amount provided in 1991.

America 2000.—The Committee has provided $100,000,000 for the Education Excellence-America 2000 Program requested by the administration, subject to it being authorized by December 31, 1991.

Head Start.—Recognizing that early intervention programs work, the Committee has provided $2,201,000,000 for the Head Start Program, an increase of $150,000,000 over the administration request and $250,000,000 over fiscal year 1991.

Student financial aid.—The bill includes $6,900,356,000 for student financial aid, an increase of $186,675,000 over the fiscal year 1991 appropriation. Campus-based programs receive significant increases, including a 10-percent increase for the Supplemental Educational Opportunity Grants Program and a 20-percent increase for the State Student Incentive Grants Program. The Work-Study Program receives a $23,787,000 increase, and the Perkins Loan Program is funded at a level sufficient to increase funds available for new loans by approximately $13,300,000 in 1992.

Education of individuals with disabilities.—Special education programs receive a 10-percent increase overall. The Grants for Infants and Families Program receives an additional $57,892,000 to assist States facing a fiscal crisis to stay in the program and to provide awards to those States making progress toward full implementation.

Rehabilitation services.—Rehabilitation programs receive a 10-percent increase overall. These programs are critical to ensure that the promises of the Americans with Disabilities Act become a reality for individuals with disabilities seeking employment.

CHIEF FINANCIAL OFFICERS ACT

The Committee has not specifically deleted funds, as did the House, for implementation of the Chief Financial Officers Act. The Committee expects the agencies to carry out the Chief Financial Officers Act to the extent practicable within existing funds.

TITLE I—DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING ADMINISTRATION

PROGRAM ADMINISTRATION

Appropriations, 1991	$69,185,000
Budget estimate, 1992	74,188,000
House allowance	74,188,000
Committee recommendation	73,980,000

The Committee recommends an appropriation of $73,980,000 from the general fund of the Treasury for program administration. This amount is the same as the House allowance and the administration request. It is $4,795,000 more than the comparable amount for fiscal year 1991.

The Committee also recommends a trust fund limitation of $56,952,000 for fiscal year 1992, which is $177,000 less than the House allowance and the administration request, and $3,959,000 more than the comparable fiscal year 1991 amount.

The recommendation provides for 1,740 full-time equivalent [FTE] staff, the amount of the request and 31 more than the comparable amount available for fiscal year 1991.

Of the total amount recommended, the general revenue portion provides for the Federal staff costs of the Employment and Training Administration for the direction and operation of the employment and training programs authorized under the Job Training Partnership Act, as amended; the Older Americans Act of 1965, as amended; and the National Apprenticeship Act of 1937. The unemployment trust fund provides for Federal staff costs related to employment service functions under title III of the Social Security Act of 1935, as amended; and the Immigration and Nationality Act, as amended. Federal staff costs for activities related to employment service functions under the Wagner-Peyser Act, as amended, are split 97 percent to 3 percent, respectively, between the unemployment trust fund and general revenues.

The Committee concurs with the administration request which includes built-in increases for pay, personnel benefits, and workmen's compensation, as well as nonpersonnel costs such as travel, transportation of things, rent, communications, printing, administrative support and other services, supplies and equipment. The Committee has provided an additional $447,000 to the Bureau of Apprenticeship and Training for support of activities related to the school to work demonstration initiative. However, executive direction activities have been held to last year's enacted level of $3,870,000.

One program change has been requested, and approved by the Committee, an increase of $1,460,000 and 31 FTE's for the alien certification program.

TRAINING AND EMPLOYMENT SERVICES

Appropriations, 1991	$4,077,951,000
Budget estimate, 1992	4,051,731,000
House allowance	4,137,771,000
Committee recommendation	4,201,508,000

The Committee recommends an appropriation of $4,201,508,000 for training and employment services. This is $149,777,000 above the administration request and $123,557,000 above the 1991 appropriation.

This account is comprised of programs designed to enhance the employment and earnings of economically disadvantaged and dislocated workers, operated through a decentralized system of skill training and related services as primarily authorized by the Job Training Partnership Act. This appropriation is forward funded on a July to June cycle. Funds provided for fiscal year 1992 will support the program from July 1, 1992 through June 30, 1993.

Block grant.—The Block Grant Program gives Governors primary responsibility for an array of job training and employment services in their States. The private sector has an important role in oversight, planning, and decisionmaking, as well as operation of programs at the local level. As required by law, at least 70 percent of the funds must be used for skill training. The $1,773,484,000 recommendation is the same level as the House allowance and $5,000,000 below the budget request and the 1991 level. This will provide approximately 426,000 average enrollments during program year 1992.

The Committee remains concerned over continuing reports of excessive on-the-job training program payments and urges the Labor Department to take whatever steps are necessary to curtail wasteful spending, applying the savings to serve greater numbers of disadvantaged individuals than would otherwise be possible.

Summer youth employment and training.—The Summer Youth Employment and Training Program provides jobs for economically disadvantaged youth during the summer months. The Committee recommendation is $682,912,000, the same level provided in 1991 for the summer of 1992, and the same as the House allowance and budget request. The amount is expected to result in 527,000 participants in the summer of 1993, the same as in the summer of 1992.

Dislocated worker assistance.—The Committee recommends $576,986,000 for dislocated worker assistance in 1992, an increase of $50,000,000 above the budget request and 1991 appropriation. Of this amount, $526,986,000 is authorized by title III of JTPA for economic dislocation and worker adjustment assistance and includes components to promote early identification of dislocated workers, the rapid provision of services to such workers, and emphasizes the provision of quality training to them. Also included is $50,000,000 for employment transition assistance under the Clean Air Act, available from October 1, 1991, through June 30, 1993. In total, an estimated 134,000 average enrollments are expected to be provided.

The Committee remains concerned about the impact changes in Federal environmental policy is having on small communities, particularly in the Pacific Northwest. Many of these communities are almost entirely dependent upon the forest products industry for their employment base. In Oregon alone, Federal studies estimate that a minimum of 25,000 jobs will be lost by 1995. Demands for social services in affected communities will increase significantly, particularly for worker retraining and attendant readjustment services. However, due to the erosion of the tax base, local public agency resources will be scarce.

The Committee, therefore, urges the Department to give expeditious consideration of applications for emergency discretionary grants. In addition, the Department is encouraged to provide technical assistance when requested and regulatory flexibility where possible to assist in crafting workable plans for these impacted communities. The Committee requests the Secretary give careful consideration to soliciting proposals from affected States to demonstrate model programs for delivering readjustment services to workers residing in heavily impacted rural areas.

The Committee urges the Labor Department to develop and fund a model demonstration project in the region affected by timber harvest reductions under the Endangered Species Act, targeted at dislocated homemakers for training opportunities. The Committee encourages the Department to utilize the expertise of the Women's Bureau of the Labor Department in developing and implementing this program.

The Secretary is directed to utilize funds from the Secretary's Discretionary Grant account under JTPA title III in fiscal year 1992 for the continuation of the Mass Layoffs Statistics Program provided for in section 462(e) of the act, which the budget request proposed to eliminate.

Native Americans.—These programs are designed to improve the economic well-being of disadvantaged native Americans (Indians, Eskimos, Aleuts, and native Hawaiians) through vocational training, work experience, and other services aimed at getting participants into permanent unsubsidized jobs. The Committee recommends $64,000,000 for these purposes, which is an increase of $5,310,000 above the budget request and an increase of $4,375,000 over 1991. Over 31,000 Indian adults in all of the 50 States are currently served by these programs.

Migrant and seasonal farmworkers.—Programs for migrant and seasonal farmworkers are aimed at alleviating chronic unemployment and underemployment being experienced by farmworker families. Training and employability development services prepare farmworkers for stable, year-round employment, both in and outside the agricultural industry. Supportive services such as health care and day care are also provided. The Committee recommends $80,000,000 for these purposes, which is an increase of $23,089,000, above the budget request and $9,712,000 above 1991.

The increase provided by the Committee is necessary to assist in meeting the additional demand for training services from individuals and their families who have become newly eligible, such as those under the Special Agricultural Worker Program. Estimates of the increase in the eligible population received by the Committee in prior years have ranged from 400 to 600 percent. The Committee expects the Department to continue the practice of allocating a significant portion of annual funding increases based upon the estimated increases from enactment of the Immigration Reform and Control Act of 1986.

The Department is in the second year of a 2-year agreement with the Association of Farmworker Opportunity Programs to provide essential data and technical assistance concerning the needs of farmworkers and their families, the services they receive and to conduct a peer exchange project. The Committee urges the Department to continue support of this activity.

Job Corps.—The Job Corps provides severely disadvantaged youth, aged 16 to 21, with basic education, vocational training, job placement, medical support, and other services in a primarily residential setting. The Committee recommendation provides $927,497,000, an increase of $40,000,000 above the budget request and an increase of $60,000,000 above the 1991 appropriation. Of the total provided, $847,033,000 is for operations. This will provide 41,338 slots and includes $10,000,000 above the request for increasing costs of operating the program. A total of $80,464,000 is provided for construction, rehabilitation, and acquisition. This amount represents an increase of $30,000,000 over the budget request for additional center relocations, such as New Orleans, LA, capital investments, such as Grafton, MA, and Ouachita Job Corps Center near Hot Springs, AR, higher than anticipated costs of opening previously approved new centers, and to the extent possible, planning and priority site acquisition for further expansion. The Committee is aware of strong interest in a number of communities throughout the country in the expansion of the Job Corps program. Communities, such as Butler, PA; Chicago IL; Prince George's County, MD; Compton, CA; and Seattle, WA, have demonstrated broadbased support for obtaining a Job Corps center and participating in the Job Corps program. The administration request for a reappropriation of $20,000,000 of funding originally provided in 1989 for new center construction to be used for basic construction, rehabilitation, and acquisition for existing centers is rejected, and the Department is directed to expeditiously proceed with the development of the new centers.

The Committee recognizes the merits of the Job Corps 50–50 plan (developed in response to last year's Committee recommendation for a long-term expansion of Job Corps) and intends to work in upcoming years with the Department of Labor to serve more of the Nation's growing numbers of at-risk, poverty youth through Job Corps. The 50–50 plan, as proposed, would allow Job Corps to serve 50 percent more poverty youth annually by opening 50 new Job Corps centers.

The Committee recognizes the success of the Job Corps beginning and remedial reading programs in achieving substantial reading gains among Job Corps students. The Committee recommends that the Department of Labor obtain maximum use of Job Corps center facilities curricula and experience by making centers available during the evening hours for adult literacy programs. Funds should be sought from the Department of Education and other Federal, State, and local agencies to compensate instructors, pay for utilities, and purchase of supplies.

Veterans employment.—The Committee provides $9,120,000 for special veterans employment programs. This is an increase of

$328,000 above the budget request, and the same amount as the House allowance and the 1991 level. These funds provide special employment and training programs designed to meet the unique needs of disabled, Vietnam-era, and recently separated veterans.

The Committee is aware that training and employment services available to native American veterans is very limited and urges the development of remedial education, classroom, and on-the-job training.

National activities.—These programs provide employment and training assistance to special target populations, such as offenders, handicapped individuals, and older workers. These funds are also used to support research and development, evaluation, labor market information, and training and technical assistance. Contracts with groups such as labor unions and community-based organizations are awarded at the discretion of the Secretary.

The Committee provides $76,286,000 for these national programs, an increase of $24,827,000 over the budget request and $4,470,000 over the 1991 level. The recommendation includes: $11,927,000 for research and evaluation; $4,098,000 for labor market information; $5,260,000 for training and technical assistance; $6,000,000 for the National Occupational Information Coordinating Committee; $1,848,000 for the National Commission for Employment Policy; and $38,753,000 for pilots and demonstrations; $4,500,000 for American Samoans; $3,900,000 for rural concentrated employment programs; and $11,223,000 for homeless programs.

The Committee supports the establishment of a Career Development Institute to train personnel in assisting students to understand themselves in the context of their career development, to be aware of the world of work, to understand the linkage between academic skills and work-related skills and to make effective career decisions. The Committee recommends that NOICC expend up to $1,500,000 in fiscal year 1992 for the establishment and operation of such an institute.

In its fiscal year 1992 report, the Committee expressed concern that youth crime, gang involvement, and drug abuse are growing at alarming rates. The Committee report identified unique issues and some promising approaches to the problems of at-risk youth in Des Moines, Milwaukee, east Los Angeles, Fresno, Newark, Boston, and the 10-county southeastern Iowa area. The Committee's concern was that many at-risk youth have little hope for their own futures, are exposed to few achievable alternatives to a life of gang membership, crime and drug abuse, and frequently end up as adult prison inmates at great expense to taxpayers. The Committee also noted the experience of the Eisenhower Foundation in initiating and assisting innovative community anticrime and youth alternative strategies. Nearly $5,000,000 was provided in the fiscal year 1992 title IV "National activities, pilots, and demonstrations" account to support demonstration programs addressing the education, training, and service needs of at-risk youth in these seven communities. The Committee is hopeful that the Department will implement a demonstration program in seven communities during the summer of 1992 and that the demonstrations will continue at least through the program year ending June 30, 1994. To that end, the Committee has included $5,000,000 in the fiscal 1992 title IV "National activities, pilots, and demonstrations" account to continue programs at seven demonstration sites.

The Committee also has provided $2,000,000 for the purpose of maintaining and expanding the Department's farm labor information exchange demonstration throughout the east, west, and midcontinent migrant streams. These pilot programs link the resources of section 402 grantees and their ability to reach domestic farmworkers with information generated by employment security agencies regarding employment opportunities and related services.

The Committee has added $4,000,000 to maintain and expand the Department's School to Work Demonstration Program. In order for students to be prepared to enter the work force of today, they must have better skills than ever before. These demonstrations link students' educational experience with workplace opportunities in order to stimulate their interest in education and provide them with viable career options.

An increasing number of young people have completed high school and postsecondary education but have difficulty accessing the employment sector. The Committee encourages the Secretary to apply the school to work demonstration concept to this targeted population as well and to explore joint projects in this area with the Department of Education.

The Committee provides $4,500,000 to continue the Samoan, Pacific islander, and Asian immigrant employment and training initiative to provide job training, bilingual and vocational education, and job placement for these underemployed groups. Of this total, $3,500,000 is for the State of Hawaii; $750,000 is for California; and $250,000 is for Washington.

Hawaii continues to have one of the lowest unemployment rates in the Nation. The resulting labor shortage has created job opportunities for groups who have been traditionally excluded from the labor market. In its first 2 years, the JobHelp Store served approximately 1,000 Pacific islander and Asian immigrants, and of this total, over 400 are now employed and another 500 are being trained to enter employment and are on their way to self-sufficiency. Satellite centers are planned for pocket areas on Oahu where there are high concentrations of particular immigrant groups. Additionally, the program will expand to improve the employment status of native Hawaiians in the public sector and in particular, the State of Hawaii's civil service population. While native Hawaiians represent 20 percent of the total State population, they make up only 5 percent of the States' civil service employees. Of this amount, many are employed in the low-skill and low-wage categories due to a lack of skills which the JobHelp Stores, in conjunction with the Department of Personnel Services, shall work to remedy and in so doing, improve the self-sufficiency and self-image of native Hawaiians.

The Committee is aware of the need to conduct studies on work force development, and to design demonstrations focusing on minorities, women, and new immigrants to address the requirements of the world of work as we approach the 21st century. The Committee urges the Department to develop a strategy to deal with these issues.

The Committee is concerned that, in general, funding has not been increased for support of national community-based organizations [CBO's] for the last 5 years. Organizations such as Opportunities Industrialization Centers of America, the National Council of La Raza, the National Urban League, the National Puerto Rican Forum, and national disability organizations historically have assisted local community-based organizations meet the employment, training, and placement needs of the most disadvantaged populations. The Committee encourages the Secretary to increase support to national community-based organizations and disability-related programs such as those serving individuals with mental retardation epilepsy, vision impairments, and other disabilities. This enhanced support will strengthen the capacity of these organizations to reach and serve the most disadvantaged populations who will comprise a major portion of this Nation's future work force.

The Committee urges the Secretary to consider funding the National Workforce Literacy Assistance Collaborative, to assist small- and medium-sized businesses and labor organizations in implementing literacy programs for individuals with low basic skills.

The Committee expects the Department of Labor to continue the farmworker housing program at a level $200,000 above the current level and has added the funds to the account for that purpose.

The Committee is particularly concerned about the lack of any innovative work force skills training methodology under development concomitant with new technological manufacturing advances. The Committee urges the Department of Labor to encourage demonstration programs to facilitate the skills development of today's work force to accompany the emerging processes associated with tomorrow's new manufacturing technological demands.

The Committee is pleased with the Department of Labor's broad based effort to develop the skills of America's work force. Its efforts in establishing a dialog on the transition of youth from education to high value careers through the school to work demonstration program is creative and important to our youth and should be continued and expanded. Additional efforts to upgrade and expand the skills of our current work force are critical and should also be continued and expanded. Sharing this information among all of the elements of our diverse economy is important. The work recently begun by the Department to collect, evaluate, and share data including best practices and curriculum among all of the partners will help facilitate this effort. The new efforts by the Department to bring industry together to set broad based education, training, and skill certification standards is an extremely important effort and the Committee expects the Department to fully utilize its available resources in the support of this critical effort. The Department should also make a special effort to explore and develop skill assessment centers to assist all workers, those who may be beginning their careers and those who may need assistance during their careers, to assess their needs and to find out how they can remain competitive in the labor force.

The Committee has included bill language to insure that no State receive more than a 30-percent annual increase in JTPA block grant funds; with overall funding at virtually a freeze level, this provision is intended to alleviate the potential loss of funds in

States that have experienced substantial losses in previous years, due to application of the statutory allocation formula.

COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS

Appropriations, 1991	$390,360,000
Budget estimate, 1992	342,814,000
House allowance	390,360,000
Committee recommendation	400,000,000

The Committee recommends an appropriation of $400,000,000 for this program, an increase of $9,640,000 over the House allowance and $57,186,000 over the budget request.

This program provides part-time job opportunities in community service activities for unemployed, low-income individuals, aged 55 and older, as authorized by title V of the Older Americans Act. Program participants generally work 20 to 25 hours per week in a wide variety of activities including day care, schools, hospitals, senior citizen centers, nutrition programs, and facilities for the handicapped.

The Committee allowance would provide approximately 66,000 average enrollments for the period July 1, 1992 to June 30, 1993. Average unit costs for this program have increased, due to higher minimum wage rates, and other factors.

The Committee has retained the existing bill language percentage distribution of resources between States and national contractors of 22 percent and 78 percent, respectively.

Title V has amply demonstrated the valuable contribution that older workers can make in their communities. The Committee reaffirms its strong support for this effective program and encourages efforts to obtain greater minority participation. It is the intent of the Committee that the current sponsors continue to build upon their past accomplishments. The Committee believes that the size of grants currently awarded to the smaller national sponsors are not adequate to administer the program. The Committee recommends that the Department of Labor establish a reasonable minimum floor above which all national contracts are funded. Allocations necessary to undergird program operations must be sufficient to provide adequate administrative support and oversight. Any sponsor required to operate without adequate funding is placed in a high-risk position which is deleterious to the total program and the population they serve. The Committee also recommends that the Labor Department develop and implement a plan which will lead to greater parity among the national sponsors. The financial stability of each sponsor is necessary to the success of the program.

The Committee encourages service delivery areas under the Job Training Partnership Act to make greater use of national sponsors under the community service employment program for older Americans as a means for enrolling more economically disadvantaged persons aged 55 or older in training programs. Service delivery areas should continue to utilize State and area agencies on aging and increase their involvement in job training programs.

FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES

Appropriations, 1991	$269,500,000
Budget estimate, 1992	226,250,000
House allowance	226,250,000
Committee recommendation	226,250,000

The Committee recommends an appropriation of $226,250,000 for this account. This is the same as the budget request and House allowance and $43,250,000 less than the comparable amount for fiscal year 1991.

These funds provide for the payment of trade adjustment assistance weekly benefits and training allowances to workers adversely affected by increased imports and certain benefits and allowances under the Redwood National Park Act Amendments of 1978.

For fiscal year 1992, the Committee has provided funding of $154,000,000 for trade adjustment assistance benefits. This will provide weekly benefits to approximately 24,000 workers at an average weekly rate of $182. In addition, $16,000,000 in retroactive benefits are to be paid as a result of a recent reinterpretation of the Trade Act.

The Committee has also provided $72,000,000 for trade assistance training. These funds will provide classroom training for 20,800 workers, on-the-job training for 1,500 workers, and job search and relocation allowances for 1,800 workers.

In addition, the Committee has determined that workers covered under provisions of the Redwood National Park Act, as amended, will have the costs of health and pension benefits provided at an estimated cost of $250,000.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS

Appropriations, 1991	$24,983,000
Budget estimate, 1992	24,700,000
House allowance	23,377,000
Committee recommendation	24,700,000

The Committee recommends a Federal fund appropriation of $24,700,000 for State unemployment insurance and employment service operations, the amount of the request and $283,000 less than the comparable amount for fiscal year 1991. The balance of the funding for this account is to be derived from the "Employment Security Administration" account of the unemployment trust fund. The Committee recommends a trust fund limitation of $3,178,485,000. This trust fund amount is $26,660,000 over the House allowance and $95,600,000 over the administration request. It is $184,472,000 more than the comparable amount provided in fiscal year 1991.

This Committee recommendation provides funding to State employment security agencies for the administration of Federal and State compensation laws and local public service employment offices. In addition, the recommendation includes a contingency fund to meet increases in the costs of administering the unemployment insurance portion of these employment security operations.

The Committee recommendation for the employment service totals $940,300,000 and consists of $24,700,000 in Federal funds and

$915,600,000 in trust funds. This recommendation is $95,600,000 over the amount of the request and $55,745,000 more than the comparable amounts for fiscal year 1991.

Of the total amount provided for the employment service, $838,100,000 is for State grants, available for the program year extending from July 1, 1992 to June 30, 1993. These grants, consisting of $22,500,000 in Federal funds and $815,600,000 in trust funds, are distributed to the States by means of a demographically based formula enacted as part of the 1982 amendments to the Wagner-Peyser Act. They provide funding for State public employment services such as job counseling, testing, and referral to employers.

The balance of the funds for the employment service, $102,200,000, is $7,500,000 over the amount of the request and is $22,762,000 more than the comparable amount provided for fiscal year 1991.

The recommendation for the employment service includes $12,500,000 over the request for continuation of automation activities, and an increase of $22,500,000 for immigration activities, which is $5,000,000 less than the request. The Committee concurs with the budget request of $20,000,000 for the Targeted Jobs Tax Credit Program.

The Committee also recommends the financing change, requested in the budget submission, to shift $1,323,000 in the financing of the employment service from trust to Federal funding in order to maintain consistency with section 901 of the Social Security Act.

The Committee recommends that the Labor Department, in allocating employment service 3 percent set-aside funds, insure that no State be reduced below its prior year's level, to the maximum extent possible.

For the unemployment insurance service, the Committee recommends a total of $2,262,885,000 in trust funds, the amount of the request and $128,444,000 more than the comparable amount provided for fiscal year 1991. Of the amounts provided for the unemployment insurance service, $1,510,973,000 is recommended for State operations and $304,723,000 for State integrity activities. In addition, $6,486,000 is provided for national unemployment insurance activities and $440,703,000 is included for the unemployment insurance contingency fund. Also included within the overall unemployment insurance amount is $18,427,000 for State automation activities.

The recommendation for unemployment insurance includes built-in changes to provide increases for State salaries and benefits, nonpersonnel services, economic assumptions, and normal growth in the covered work force and in the number of subject employers.

One program change is recommended for the unemployment insurance service, which is an increase of $16,910,000 to provide for postal rate changes.

The Committee concurs with the House bill language establishing a reserve fund for unemployment offices in the event claims workload exceeds the volume projected in the budget request. An additional $30,000,000 would be made available on a pro-rata basis for every 100,000 increase in average weekly insured unemployment [AWIU] above the 3.24 million claims volume upon which the President's request is based. This reserve fund is designed to prevent severe backlogs in processing unemployment claims in the event of economic downturns without having to wait for supplementals which are often too late to avoid severe disruptions.

ADVANCES TO THE UNEMPLOYMENT TRUST FUND AND OTHER FUNDS

Appropriations, 1991	$328,000,000
Budget estimate, 1992	236,990,000
House allowance	236,990,000
Committee recommendation	236,990,000

The Committee recommends an appropriation of $236,990,000 for advances to the unemployment trust fund and other funds. This is the same as the House allowance and administration request. The recommendation is $91,010,000 less than the comparable amount provided for fiscal year 1991.

This appropriation provides Federal funds necessary to make required payments for unemployment compensation, black lung, and other benefits, whenever the fund balances in those accounts prove insufficient to make payments which are mandatory under the law.

The entire request, $236,990,000, plus an estimated $82,010,000 in unused funds, available from fiscal year 1991, will be available for use for advances to the black lung disability trust fund to ensure an adequate cash flow within the fund.

In fiscal year 1992, should the need for advances arise in any of the other accounts eligible to receive them, due to unanticipated changes in the economic situation, advances will be made to the extent that funds are available.

LABOR-MANAGEMENT SERVICES

Appropriations, 1991	$87,376,000
Budget estimate, 1992	95,840,000
House allowance	95,840,000
Committee recommendation	94,840,000

The Committee recommends an appropriation of $94,840,000 and 1,058 full-time equivalent [FTE] staff for labor-management services. The recommended amount is $1,000,000 less than the House allowance and the budget estimate. It is $7,464,000 over the fiscal year 1991 comparable level, but provides for 20 fewer FTE.

The labor-management services appropriation incorporates the Bureau of Labor-Management Relations and Cooperative Programs, the Office of Labor-Management Standards, and the Pension and Welfare Benefits Administration. The Bureau of Labor-Management Relations and Cooperative Programs supports high-priority labor relations functions designed to encourage labor-management cooperation to enhance productivity and improve the competitive posture of the United States. The Office of Labor-Management Standards combats serious violations of the Labor-Management Reporting and Disclosure Act and related acts covering public employee unions which interfere with democratic procedures within labor organizations. The Pension and Welfare Benefits Administration enforces the Employee Retirement Income Security Act in both civil and criminal areas as well as sections 8477 and 8478 of the Federal Employees' Retirement System Act.

Included in the Committee's recommendation are net program and mandatory increases of $230,000 and $7,234,000, respectively. The Committee recommends program increases of $150,000 for printing and supplies and $125,000 for equipment to enforce the Labor-Management Reporting and Disclosure Act; and $215,000 for increased audit contracts and travel. The Committee has deleted the requested $1,000,000 to cover higher operating costs of the information data base in support of Employee Retirement Income Security Act program. The recommendation also includes program decreases of 10 FTE's and $678,000 in the Bureau of Labor-Management Relations and Cooperative Programs and 10 FTE's and $582,000 in the Office of Labor-Management Standards that were requested because of budgetary constraints.

Mandatory increases recommended by the Committee cover items such as personnel compensation and benefits, travel, GSA space rent, communications, utilities, printing, other services, supplies, and equipment. Included is $4,035,000 to pay the Internal Revenue Service for increased costs of processing the annual series 5500 returns. This increase is partially offset by a built-in decrease of $447,000 related to one-time equipment purchases in fiscal year 1991.

PENSION BENEFIT GUARANTY CORPORATION

This is a wholly owned Government Corporation established by the Employee Retirement Income Security Act of 1974. The law places it within the Department of Labor and makes the Secretary of Labor the chair of its board of directors. The Corporation is self-financing and receives its income primarily from insurance premiums collected from covered pension plans, collections of employer liabilities imposed by the act, and investment earnings. It is also authorized to borrow up to $100,000,000 from the Treasury. The primary purpose of the Corporation is to guarantee the payment of pension plan benefits to participants if covered plans fail or go out of existence.

The Committee has approved the Corporation's budget program for fiscal year 1992. This includes benefit payments of $918,006,000, multiemployer financial assistance of $1,200,000, an administrative expenses limitation of $47,787,000, and nonlimitation expenses of $25,025,000. In the administrative expenses activity, the recommendation provides an increase of $6,146,000 over the fiscal year 1991 comparable level. The Committee recommendation also includes 567 full-time equivalent [FTE] staff.

The Committee recommendation includes, in the administrative expense activity, the requested program increases of $4,325,000 and 21 FTE's. These increases include $567,000 and 15 FTE's for legal and financial staff, $1,103,000 and 6 FTE's for premium collection efforts, $1,255,000 for improved information resource management, $400,000 for improved trust fund accounting, and $1,000,000 for preparation of audited financial statements. These increases will help the Corporation reduce its reliance on more costly outside legal and financial firms and help the Corporation collect an expected $4,000,000 to $10,000,000 in additional premiums. An increase of $1,821,000 for built-in items such as personnel compensation, travel, rent, and contractual services is also provided.

The recommendation includes the bill language recommended by the administration and adopted by H.R. 1281, the Dire Emergency Supplemental Appropriations Act, 1991 (Public Law 102–27). This bill language deletes the word "contractual" and the words "legal and financial". These changes will enable the Corporation to continue to spend outside its administrative expense limitation for any purpose in connection with the termination of pensions. Expenses related to pension plan terminations are unpredictable. The Committee recognizes the need for immediate response by the Corporation to take over pension plans to limit losses and this vital work could be seriously hampered by the time delays associated with the normal appropriations process. This bill language would not affect Federal outlays since the off-budget trust fund would reimburse the on-budget revolving fund for these expenses.

EMPLOYMENT STANDARDS ADMINISTRATION

Appropriations, 1991	$215,153,000
Budget estimate, 1992	232,626,000
House allowance	232,626,000
Committee recommendation	231,326,000

The Committee recommends an appropriation of $231,326,000 for the Employment Standards Administration, which is $1,300,000 less than the administration request and the House allowance. The recommendation is $16,173,000 more than the fiscal year 1991 comparable appropriation of $215,153,000. Also included is authority to expend $1,035,000 from the special fund established by the Longshore and Harbor Workers Compensation Act, which is the amount requested and provided by the House.

The Committee has approved 3,899 full-time equivalent [FTE] staff for this agency, a decrease of 6 FTE's from the comparable number in fiscal year 1991. This number includes staff that are financed by a transfer of $30,145,000 from the black lung disability trust fund.

The Employment Standards Administration administers employment standards programs under several laws, including the Fair Labor Standards Act, the Immigration Reform and Control Act of 1986, the Employment Polygraph Protection Act of 1988, the Migrant and Seasonal Agricultural Workers' Protection Act, the Davis-Bacon Act, the Federal Employees' Compensation Act [FECA], the Longshore and Harbor Workers' Compensation Act, and the Federal Mine Safety and Health Act (black lung); and assures nondiscrimination and affirmative action for minorities, women, veterans, and handicapped workers by administering Executive Order 11246, as amended, affirmative action provisions of the Rehabilitation Act of 1973, as amended, and the Vietnam Era Veterans' Readjustment Assistance Act of 1974.

The Committee recommendation includes a program increase of 50 FTE's and $2,895,000 to the FECA Program for the periodic roll initiative. A requested increase of 13 FTE's and $750,000 is denied the Wage Hour Program reflecting the permanent prohibition on implementation of the Davis-Bacon helper regulations enacted in section 303 of Public Law 102–27. The Committee has been informed by the Department of Labor that it is in compliance with the permanent prohibition contained in the Dire Emergency Supplemental Appropriations Act of 1991 concerning implementation of the Davis-Bacon helper regulations. The Committee believes, therefore, that the Department of Labor's request for additional funding to implement the Davis-Bacon helper regulations is unnecessary. Section 303 of the Dire Emergency Supplemental Appropriations Act of 1991 (Public Law 102–27) permanently prohibits the Secretary of Labor from expending any funds to implement or administer the helper regulations.

The Committee recommendation also includes funding for built-in increases such as Federal pay raises, within-grade increases, career ladder promotions, locality pay, executive pay, an extra day of pay, Federal employees' compensation fund, space rent, travel, transportation of things, printing, utilities and other rent, supplies, equipment, and working capital fund.

The Committee reiterates its position that there will be no black lung field office closings in West Virginia.

The Committee has approved requested program reductions of 56 FTE and $2,775,000 related to decreased costs and budget constraints in the Wage Hour, Office of Federal Contract Compliance, and Black Lung Programs. The amount for executive direction activities has been reduced $550,000 below the request, to restrain funding at the fiscal 1991 level.

SPECIAL BENEFITS

Appropriations, 1991	$322,000,000
Budget estimate, 1992	192,000,000
House allowance	192,000,000
Committee recommendation	192,000,000

The Committee concurs with the budget request of $192,000,000 for special benefits. The recommendation is $130,000,000 under the fiscal year 1991 appropriation and the same as the House allowance and the budget request.

The account provides funding necessary to meet required payments for compensation, medical costs, vocational rehabilitation, and other benefits to those individuals eligible for assistance under the Federal Employees' and Longshore and Harbor Workers' Compensation Acts.

The $192,000,000 provided for this entitlement account consists of $188,000,000 for payments under the Federal Employees' Compensation Act [FECA] and $4,000,000 under the Longshore and Harbor Workers' Compensation Act.

The Committee recommends appropriation language that provides authority to use the FECA fund for a demonstration project in which the Secretary may reimburse a new employer for a portion of the salary of a newly reemployed injured Federal worker. The FECA fund will be used to reimburse new employers during the first 3 years of employment not to exceed more than 75 percent of salary in the workers' first year, 50 percent in the second year, and 25 percent in the third year. The Secretary is authorized to experiment with other rates of reimbursement during the demonstration project. Costs will be charged to the FECA fund.

The Committee recommends continuation of appropriation language that retains the drawdown date of August 15. The drawdown authority enables the agency to meet any immediate shortage of funds without requesting supplemental appropriations. The August 15 drawdown date allows maximum flexibility for continuation of benefit payments without interruption.

The Committee also recommends the continuation of appropriation language that provides authority to transfer funds from the Postal Service fund to the FECA account for the payment of administrative costs incurred by ESA for servicing Postal Service employees in fiscal year 1992.

The Committee also recommends appropriation language that provides for any unobligated balance of deposits in the FECA account as of September 30, 1991, to remain available until expended for the payment of compensation, benefits, and expenses.

FECA benefits will be paid from this account to employees of the Panama Canal Commission. In 1989, a Panama Canal Commission compensation fund was established to provide for the accumulation of funds to defray the Commission's workers' compensation obligations pursuant to the Federal Employees' Compensation Act.

BLACK LUNG DISABILITY TRUST FUND

Appropriations, 1991	$919,217,000
Budget estimate, 1992	917,948,000
House allowance	917,948,000
Committee recommendation	917,948,000

The Committee recommends an appropriation of $917,948,000 for the black lung disability trust fund. This is the same as the administration request and the House allowance. The recommendation is $1,269,000 less than the fiscal year 1991 comparable amount.

The Committee recommendation for this entitlement program is $570,187,000 for payment of benefits, including $52,052,000 from prior year budget authority and $56,057,000 for salaries and expenses for various components of the Department of Labor. The recommendation also includes $343,000,000 to be drawn down primarily for interest payments on advances.

The trust fund pays all black lung compensation/medical and survivor benefit expenses when no responsible mine operator can be assigned liability for such benefits, or when coal mine employment ceased prior to 1970, as well as all administrative costs of the Department of Labor, including reimbursement of Health and Human Services, and Treasury incurred in administering the benefits program and operating the trust fund.

Financing for the fund comes from a coal excise tax, reimbursement payments from mine operators for benefit payments made by the fund before the mine operator is found liable, and advances to the fund to assure availability of necessary funds when liabilities may exceed other income. The Omnibus Budget Reconciliation Act of 1987 continues the current tax structure until 2014. Advances for fiscal year 1992 are estimated at $319,000,000.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

Appropriations, 1991	$285,193,000
Budget estimate, 1992	302,107,000
House allowance	302,107,000
Committee recommendation	305,207,000

The Committee recommends an appropriation of $305,207,000 for the Occupational Safety and Health Administration, which is $20,014,000 over the fiscal year 1991 comparable appropriation and is $3,100,000 over the House allowance and budget request.

The Occupational Safety and Health Administration promulgates occupational safety and health standards and enforces compliance by inspecting places of employment. The agency also provides consultation, training, and information services for employers and employees and publishes statistics concerning the incidence, severity and cause of occupational injuries and illnesses. Fifty percent matching grants are provided by the Occupational Safety and Health Administration to assist States and jurisdictions in administering and enforcing State occupational safety and health programs.

The Committee recommendation of $305,207,000 includes a full-time equivalent [FTE] staff of 2,468. The recommendation also includes $66,344,000 for State operational grants, which is an increase of $2,613,000 over the 1991 comparable level and the same as the House allowance and budget request.

The Committee has included $500,000 for grants to improve the technical literacy of employees and make the scientific terminology of material safety data sheets [MSDS's] readily understandable by workers and community organizations.

The Committee has added $500,000 and seven FTE's over the budget request to support a district office in Bangor, ME. The Committee notes that OSHA was directed last year to open an office in Bangor, ME, with additional staff, to locate OSHA closer to the paper and logging industry in northern Maine, and to cover the State more fully and adequately. The additional resources provided by the Committee are needed to annulize the new office in fiscal 1992 without reducing safety and health coverage elsewhere in the region.

For compliance assistance, the Committee has added $2,500,000 over the request and House allowance. This amount is intended to augment the consultative services program to strengthen voluntary compliance with health and safety requirements.

The Committee recommends that $350,000 of the funds appropriated for targeted training grants under the compliance assistance activity be used to award a second round of demonstration grants under the pilot worker safety program for people employed in the logging industry, that was established in 1991. The Committee believes that this hazardous industry would benefit from continued efforts in this area, and believes the logging industry constitutes an area of concern at both the national and regional levels.

The Committee understands that the Occupational Safety and Health Administration is expected to promulgate its final rule on occupational exposure to bloodborne pathogens in September 1991. To effectively implement this rule in the Nation's 100,000 dental offices, clear and detailed instructions need to be developed and distributed in a timely fashion. The Committee recommends that OSHA develop a brochure and an instructional video tape of the final rule for dental offices at a cost not to exceed $45,000. The Committee understands that the American Dental Association has agreed to underwrite distribution costs of this project.

The Committee recommendation also includes funding for mandatory items such as within-grade promotions, the fiscal year 1992 pay raise and annualization of the fiscal year 1991 pay increase, personnel benefits, space rental, transportation, and travel. A decrease of $293,000 and five FTE's related to budgetary constraints is also included.

The Committee concurs with House bill language carried in last year's bill that restricts the use of funds for certain purposes. First, the bill contains language that effectively exempts farms employing 10 or fewer people from the provisions of the act except those farms having a temporary labor camp. Second, the bill contains language prohibiting the promulgation or enforcement of any regulation affecting any work activity by reason of recreational hunting, fishing, or sport shooting in that area. Third, the bill contains language exempting small firms in industry classifications having a lost workday injury rate less than the national average from general schedule safety inspections. However, the Committee modified the reporting requirement relating to accidents, changing the threshold from one to five persons hospitalized, the level in current law.

The Committee recommends $6,737,000 for executive direction activities the same as the fiscal 1991 level and $400,000 below the budget request and House allowance.

The Committee commends OSHA for its continued support of the master's level nursing internship. In addition, the Committee commends OSHA on the hiring of a second nurse as a health science specialist within the Office of the Directorate of Technical Support. These two actions demonstrate the value and contribution of nursing to occupational health that is held by the Committee.

The Committee supports the revitalization and restructuring of the directorate of technical support, and looks forward to the formalization of nursing's policymaking role within OSHA. The Committee continues to believe that this can best be accomplished through the establishment of an Office of Occupational Health Nursing at a level comparable to the Office of Medicine.

The recognition of nursing within the agency should also be reflected in the promulgation of future standards. Occupational health programs should not be limited to the sole administration of physicians. Nonphysician providers, like nurse practitioners, should be permitted to practice as provided by State law. The agency should look to the recognition of such providers and their reimbursement by Medicare, Medicaid, CHAMPUS, and FEHBP as an acknowledgement of those practitioners autonomy and authority.

MINE SAFETY AND HEALTH ADMINISTRATION

Appropriations, 1991	$173,561,000
Budget estimate, 1992	186,157,000
House allowance	186,157,000
Committee recommendation	185,364,000

The Committee recommends an appropriation of $185,364,000 for the Mine Safety and Health Administration. The recommendation is $11,803,000 more than the fiscal year 1991 comparable appropriation of $173,561,000 and is $793,000 less than the House allowance and budget request.

The Mine Safety and Health Administration is responsible for enforcing the Federal Mine Safety and Health Act of 1977 throughout the mining industry. It insures the safety and health of the Nation's miners by conducting inspections and special investigations of mine operations, promulgating mandatory safety and health standards, cooperating with the States in developing effective State programs and improving training in conjunction with States and the mining industry.

The Committee recommendation of $185,364,000 and 2,648 FTE includes increases for information systems planning, and items such as within-grade promotions, the fiscal year 1992 pay raise and annualization of the fiscal year 1991 pay increase, increased costs for the Federal employees' compensation payments, rent, transportation, and travel is also provided. However, the program administration activity is curtailed to the fiscal 1991 level of $11,808,000, which is $2,436,000 below the budget request.

The Committee has retained language carried in last year's bill prohibiting the use of funds to carry out the training provision of the act with respect to shell dredging or with respect to any sand, gravel, surface stone, surface clay, colloidal phosphate, or surface limestone mine.

An increase of $1,000,000 over the request is provided for education policy and development, restoring proposed reductions in facilities costs. Increases above the request of seven FTE's and $350,000 for coal enforcement and five FTE's and $293,000 for technical support are also provided.

The discovery by the Department of widespread tampering of respirable coal dust samples is of great concern to the Committee. While pleased that the violations were found and enforcement action initiated, the violations raise questions over the adequacy of the current respirable coal dust program to protect miners from lung disease. The Committee supports the Secretary's action to initiate the use of tamper-proof sample cassettes and the appointment of a task force to examine ways of improving the program. The Committee urges the Secretary to examine all aspects of the coal dust monitoring program to ensure the program accurately measures compliance with the respirable dust provisions of the act.

The completion of the agency's mandatory inspection responsibilities is of great interest to the Committee. To more adequately measure the agency's performance and to better assess the need for personnel to complete inspections, MSHA is directed to provide to the Committee on a quarterly basis a report concerning its inspection activities. The report should include a list of mines that did not receive the mandatory inspections during the previous period and a list of mines that did not receive complete inspections under the mandatory program.

Small mines continue to have a disproportionate share of fatal accidents. The Committee commends MSHA for establishing a special task force to investigate a number of small mines in the wake of the Granny Rose No. 3 mine accident. The agency is encouraged to build upon this task force approach as a means of reducing accidents, particularly among small mines.

The Committee is aware of concerns regarding MSHS's accident investigations and the need to conduct internal investigations into all accidents involving fatalities, explosions, and fires. Public hearings should be held which focus both on the operator's safety practices and the agency's enforcement activities prior to the accident.

BUREAU OF LABOR STATISTICS

Appropriations, 1991	$203,669,000
Budget estimate, 1992	258,504,000
House allowance	258,504,000
Committee recommendation	223,293,000

The Committee recommends a Federal funds appropriation of $223,293,000 for the Bureau of Labor Statistics. This is $35,211,000 less than the administration's request and the House allowance. The recommendation is $19,624,000 more than the fiscal year 1991 comparable appropriation.

The recommendation includes a full-time equivalent [FTE] staff level of 2,214, which is 236 less than the administration's request and the House allowance. In addition, the recommendation provides authority to spend $48,599,000 from the "Employment Security Administration" account in the unemployment trust fund. This amount is $1,800,000 less than the administration's request and the House allowance, and $2,889,000 less than the fiscal year 1991 comparable level.

The Bureau of Labor Statistics is the principal fact-finding agency in the Federal Government in the broad field of labor economics. The Bureau collects, processes, analyzes, and disseminates data on employment and unemployment; prices and living conditions; consumer expenditures; wages and employees benefits; industrial relations activities; productivity and technological change in U.S. industries; projections of economic growth, the labor force, and employment by industry and occupation; and occupational injuries and illnesses. The Bureau's statistical series provide some of the major indicators used in developing economic and social policy, making decisions in the business and labor community, developing legislative and other programs affecting labor, conducting research on labor market issues, and administering and evaluating Federal programs.

The Committee recommendation does not include the requested program increases totaling $31,850,000 to improve Federal economic indicators and to carry out new legislation. At a time when the Committee allocation is insufficient to maintain existing levels of service for an array of high-priority programs, it is necessary to postpone augmentation of certain statistical activities. Nevertheless, to the maximum extent possible, activities mandated by law should be carried out within the resource levels provided. At the same time, executive direction activities are restricted to the fiscal 1991 level of $27,258,000 which is $5,161,000 below the request and House allowance.

The Committee recommendation includes increases for built-in items such as personnel compensation, funding the Census Bureau contract, increased space rent and other costs associated with the Bureau's office consolidation in the Postal Square Building, and the planned increase in the current population survey redesign. The requested program decrease of $5,904,000 and 14 FTE's for elimination of the mass layoffs statistics program and other requested built-in and program decreases of $804,000 and 10 FTE's are also included in the recommendation. However, as described in the Training and Employment Services section of this report, the Committee expects the mass layoff statistics program to be continued, utilizing JTPA discretionary funds.

DEPARTMENTAL MANAGEMENT

SALARIES AND EXPENSES

Appropriations, 1991	$131,353,000
Budget estimate, 1992	147,956,000
House allowance	144,319,000
Committee recommendation	141,280,000

The Committee recommends a Federal funds appropriation of $141,280,000 for departmental management, salaries and expenses, which is $6,676,000 less than the administration's request and $3,039,000 less than the House allowance. The recommendation is $9,927,000 more than the fiscal year 1991 comparable appropriation.

The recommendation also includes trust funds of $332,000 to be transferred from the "Employment Security Administration" account of the unemployment trust fund, and $25,579,000 to be derived from the black lung disability trust fund. The recommendation from all sources totals $167,191,000, which supports a total of 1,924 full-time equivalent [FTE] staff. The FTE level represents an increase of 29 from the fiscal year 1991 level.

The appropriation finances staff responsible for formulating and overseeing the implementation of departmental policy and management activities for the purpose of protecting and promoting the interests of the American worker. Other activities include international labor affairs, promoting employment of people with disabilities, and the Women's Bureau.

The Committee's recommendation reflects requested program increases totaling $8,585,000 and 29 FTE's. An increase of $1,334,000 and 24 FTE's is included for the Office of the Solicitor to provide increased legal services for the collection of civil money penalties for the Employment Standards Administration, the Occupational Safety and Health Administration, and the Mine Safety and Health Administration.

The recommendation also deletes the requested $5,100,000 for the Office of the Assistant Secretary for Policy to conduct policy analysis and evaluation activities. Executive direction activities are funded at the fiscal 1991 level of $21,419,000. A portion of the requested increases, 8 percent over the 1991 level, are provided for the Office of the Solicitor for ADP support, increased stenographic reporting services, litigation support contract services, legal publications, and a one-time increase to upgrade its case tracking system. An increase of $200,000 is included for the Bureau of International Labor Affairs for grants to the International Labor Organization. Increases are included for the Women's Bureau, including $200,000 to expand the work and family clearinghouse data base and a one-time increase of $240,000 to publish its "Handbook on Women Workers." Last, a one-time increase of $259,000 is provided for the President's Committee on Employment of People with Disabilities to replace its existing computer system.

The recommendation provides an inflationary adjustment for the Women's Bureau, as well as restoring the proposed program decrease for the displaced homemakers network, for a total of $8,319,000. It also includes $4,740,000 for promoting employment of the disabled, including an increase of $500,000 for expansion of JAN, the job accommodation network.

The recommendation reflects built-in increases for such items as increased personnel compensation and benefits costs, as well as mandatory nonpersonnel cost increases for such items as space rental, working capital fund, and contracts.

The recommendation also reflects one built-in decrease of $397,000 related to one-time funding for the Office of the Solicitor to purchase equipment for new positions in 1991.

The Committee concurs in the comparative transfer of $300,000 from the Office of Inspector General to prepare annual financial statements.

ASSISTANT SECRETARY FOR VETERANS' EMPLOYMENT AND TRAINING

Appropriations, 1991	$171,885,000
Budget estimate, 1992	129,187,000
House allowance	174,759,000
Committee recommendation	174,759,000

The Committee recommends a trust fund limitation of $174,759,000 for the Assistant Secretary for Veterans' Employment and Training. This is the same amount as the House allowance and $45,572,000 more than the budget request, and $2,874,000 more than the fiscal year 1991 limitation. This limitation provides authority to expend funds from the "Employment Security Administration" account of the unemployment trust fund. In addition, the Committee recommendation also provides for 288 full-time equivalent [FTE] staff, which is the amount of the administration request.

The Assistant Secretary for Veterans' Employment and Training exercises functional supervision over the execution of veterans counseling, training and placement policies through the public employment service, and other employment and training programs. This includes responsibility for the Disabled Veterans' Outreach Program and the Local Veterans' Employment Representative Program. Other activities include promoting compliance by Federal contractors with affirmative action requirements for special veteran target groups, and handling claims from veterans, reservists, and National Guard members for restoration of jobs, seniority, and pension rights denied by their employers due to absences from the work place to perform military service.

The recommended funding levels include $73,095,000 for the Local Veterans' Employment Representative Program, $1,128,000 less than the request and an increase of $2,000,000 over the fiscal year 1991 comparable amount. In addition, $79,170,000 is provided for the Disabled Veterans Outreach Program, $44,260,000 over the request and $2,000,000 more than the fiscal year 1991 comparable amount. For Federal staff, the recommendation is $20,054,000, the amount of the request and $1,126,000 less than the comparable amount for fiscal year 1991. Last year's level of $2,440,000 is recommended for the National Veterans' Training Institute, instead of the President's request that no funds be provided.

The Committee recommends built-in increases of $7,878,000, to cover State grants, and Federal promotions, pay, benefits and nonpersonnel costs, which include travel, transportation of things, rent, printing, contracts, administrative support, supplies and equipment. A built-in decrease of $200,000 reflects a one-time reduction in equipment costs.

The Committee is aware that training and employment services available to native American veterans is very limited and urges development of at least 10 outreach programs in native American communities. The funding for these grant programs would assist tribal governments, Alaska native organizations and native Hawaiian communities in development of remedial education, classroom and on-the-job training.

A program decrease of $2,173,000 for the Transition Assistance Program is allowed.

OFFICE OF INSPECTOR GENERAL

Appropriations, 1991	$44,036,000
Budget estimate, 1992	46,636,000
House allowance	46,636,000
Committee recommendation	45,359,000

The Committee recommends $45,359,000 in general funds for the Office of Inspector General. This is $1,277,000 less than the House allowance and the budget request, and is $1,323,000 more than the fiscal year 1991 comparable appropriation.

The recommendation is in addition to trust funds of $4,357,000 to be transferred from the "Employment Security Administration" account in the unemployment trust fund and $333,000 from the black lung disability trust fund.

The Committee recommends 541 full-time equivalent positions for the Office of Inspector General, including 50 positions financed from trust funds. This total is the same as the House allowance and budget request, but 12 fewer than the comparable number in fiscal year 1991.

The Committee recommendation does not include the requested increase agreed to by the House of $1,277,000 for executive direction and management activities, instead, last year's level of $5,119,000 is recommended.

The recommended funding level includes mandatory increases for items such as personnel compensation and benefits, travel, GSA space rent, rent, communications, utilities, contracts, other services, and supplies. It also reflects a program decrease of 12 FTE's and $576,000 to finance necessary nonpersonnel support services for the requested positions. The Committee also approves the financing change of $349,000 to shift staff from trust to general fund activities due to a change in workload priorities, and the comparative transfer of $300,000 to the "Departmental management" account for the preparation of annual financial statements.

The Office of Inspector General is responsible for recommending policies to detect and prevent fraud, waste, and abuse in Department of Labor programs; increasing economy and efficiency; conducting, supervising, and coordinating audits and investigations in Department of Labor operations; and informing the Secretary and Congress about problems and corrective actions taken. The Office of Labor Racketeering investigates labor racketeering by organized criminal groups within employee benefit plans, labor-management relations, and internal union affairs.

The inspector general, U.S. Department of Labor, shall have the authority to transfer up to 20 percent of those funds appropriated for the fiscal year for the Office of Investigations to the Office of Labor Racketeering, and shall have the authority to transfer up to 20 percent of those funds appropriated for the fiscal year for the Office of Labor Racketeering to the Office of Investigations. The inspector general shall provide quarterly reports to the appropriate congressional committees and to the Secretary of Labor describing the transfers of funds made pursuant to this subsection.

TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES

PREVENTION

According to the Centers for Disease Control, about one-half of the 2.2 million deaths that occur in the United States each and every year are preventable. In spite of the fact that most health prevention measures either save lives or greatly reduce the risk of death as a result of disease, we have failed to incorporate basic prevention strategies into the core of our health care system. Instead, we spend over $700,000,000,000 each year on health care, and several billion more on health research, while ignoring the fact that placing a premium on disease prevention and health promotion is our best hope to hold down health care costs and to improve the quality of life for all Americans.

The Public Health Service, in 1990, established its health objectives for the year 2000. The objectives set out national goals to improve the health of Americans of all ages by reducing premature death, illness, and disability among our population. If we are to meet those objectives, we must begin now to put programs into place.

Therefore, the Committee has recommended increased funding for the preventive health services block grant, lead poisoning prevention, smoking and health, immunization, school health education, breast and cervical cancer prevention, occupational safety and health, and a number of other prevention initiatives, including funding for health promotion and disease prevention programs under part F of the Older Americans Act.

We can no longer afford not to adequately invest in prevention and health promotion. The heartening reductions in the prevalence of smoking by Americans assures us that other life-threatening behaviors can be changed, and the savings achieved through immunization proves that prevention makes economic sense as well. Prevention should be the first prescription for all Americans, not an after-thought of a health care system.

EARLY INTERVENTION

Programs that stress early intervention and prevention as alternatives to expensive crisis intervention and long-term remediation are cost effective. Over and again, studies have shown that early intervention makes a difference. According to one study, for every $1 invested in high-quality preschool programs, like Head Start, $4.75 is saved in lowered costs for special education, grade retention, public assistance, and crime.

With the skyrocketing costs associated with health care and the disturbing trends in our educational system, we simply cannot afford to fail those children that are disadvantaged either socially, economically, developmentally, or physically.

Therefore, the Committee has provided increases for Head Start, special education, preschool grants, and grants for infants and toddlers. If the stated No. 1 educational goal is to prepare all children to begin school ready to learn by the year 2000, then we must put into place strategies to achieve that goal. All of these programs are designed to provide early intervention services so that children will enter school with the ability to learn.

INFANT MORTALITY

The Committee finds that the health of children is a grave national concern. As America approaches the 21st century, it is painfully clear that, despite many efforts, there is more promise than progress in maternal and child health promotion and disease prevention. This is reflected in the following findings:

One, an estimated 8.3 million children and 433,000 pregnant women in the United States have no health insurance;

Two, the United States ranks 21st among industrialized nations in infant mortality;

Three, the United States surpasses almost all other developed nations in adolescent pregnancy, school failure, adolescent suicide, and rates of sexually transmitted diseases; and

Four, one of every four pregnant women is not insured for maternity care, and an equal percentage do not receive any prenatal care during the first trimester.

Some areas of the country have become infant mortality disaster areas, with rates higher those in many Third World nations. However, the Nation's infant mortality problem is not confined to just 10 areas. For example, in 1988, 1,473 rural U.S. counties—almost two-thirds of all nonmetropolitan counties—lacked even a single obstetrician.

Yet the administration's infant mortality initiative proposes to target just nine mid-size metropolitan areas and one rural area. Thus, the Committee finds that the initiative, while a noteworthy beginning, is inadequate to address the needs of the Nation.

Even in States with relatively low overall infant mortality rates, there are serious problems. For example, a recent study by the Children's Defense Fund noted that the white infant mortality rate in Des Moines, IA, is the second worst in the country for cities of 100,000 or more. The Des Moines infant death rate is 31 percent above the national average, and higher than in Cuba and Czechoslovakia. Forty percent of white infant deaths in Des Moines occur among those with the lowest income; among low-income blacks, the rate is even higher.

Throughout the Nation where there is poverty and inadequate access to care, in rural and urban areas, infant mortality is unacceptably high. AIDS, drug abuse, and fetal alcohol syndrome further compound the rate of infant and child deaths. Leading causes of death are prematurity and birth defects. It is clear to the Committee that a major initiative is needed to increase access to care and preventive measures for children and women.

Therefore, the Committee has devised a national infant mortality initiative to provide essential resources to communities across the Nation. The Committee's initiative includes providing substantial increases for the maternal and child health block grant, family planning, and the alcohol, drug abuse, and mental health services block grant. In addition, the Committee has increased funding for programs that increase preventive health services, such as childhood immunization, community and migrant health centers, lead poisoning prevention, and others. These programs also reduce infant and child death. The Committee has recommended increases for these programs in excess of $250,000,000 over fiscal year 1991 funding levels, more than twice the increase proposed by the administration.

MCH block grant

The Committee believes that resources must be provided to initiate and sustain nationwide prevention and early intervention strategies, or our infant mortality problems will remain. Thus the Committee has increased funding for the maternal and child health block grant to $686,000,000, which is $99,000,000 over the fiscal year 1991 amount and $132,000,000 above the administration request for fiscal year 1992. Funding at the authorized level allows a set-aside of funds to be used to expand maternal and infant home-visiting programs, promote integrated maternal and child health delivery systems, develop maternal and child health programs to serve rural populations, expand outpatient and community-based services programs for children with special health care needs, and fund projects to increase participation by obstetricians and pediatricians in maternal and child health programs funded by MCH and Medicaid.

Unplanned pregnancy and teen pregnancy

If all pregnancies were planned, it is estimated that the rate of low birth weight could be reduced by 5 percent for white infants, by 16 percent for black infants, and by 12 percent overall. The National Commission to Prevent Infant Mortality has estimated that infant mortality could be reduced by 10 percent if all women not desiring pregnancy used contraception.

Infants who are unplanned or unwanted have a greater risk of low birth weight and serious health problems. Yet according to the "Healthy Youth 2000" report, 56 percent of pregnancies from 1983–88 were unintended, either unwanted or earlier than desired. Teenagers account for about one-third of unintended pregnancies, and three-quarters of teenage pregnancies occur to teens who do not practice contraception. And the national pregnancy rate among girls under 18 (71.1 per 1,000 girls) is even higher for minority adolescents (186 per 1,000 for blacks and 158 per 1,000 for Hispanics).

Thus, family planning is a key program in the effort to reduce infant mortality and to prevent teen pregnancy, fight sexually transmitted diseases (including AIDS), and prevent birth defects related to prenatal exposure to dangerous drugs. The Committee has provided funding for a substantial expansion of family planning activities, especially efforts designed to increase access for teenagers, minorities, low-income, rural and other underserved high-risk groups.

Fetal alcohol syndrome

The Committee understands that fetal alcohol syndrome [FAS] is the leading identifiable cause of birth defects and mental retardation in the United States today. It is 100 percent preventable. FAS causes severe learning and behavior problems, including special problems faced by some native American groups and other high-risk populations.

Recent estimates by the Centers for Disease Control suggest that 8,000 infants are born yearly in the United States with full-blown fetal alcohol syndrome, and that many thousands more are born with fetal alcohol effects, causing serious life-time difficulties with health, learning, and behavior. The State of Alaska Legislature recently estimated that the extra cost of health, education, and social services for each child born with fetal alcohol syndrome is at least $1,400,000.

The Committee has added $137,000,000 to the alcohol, drug abuse, and mental health services block grant to ensure that every State receives the resources to address the needs of these children and their families. Programs to address this completely preventable cause of death and disability should be coordinated across Federal agencies, including the Department of Education, CDC, and the Indian Health Service. Efforts should not be restricted to high-risk populations only, as most affected children come from other groups.

Through these measures, the Committee hopes to provide the means to reduce infant mortality in communities across the Nation. Following is a summary of funding for programs in the Committee's infant mortality initiative:

	Committee recommendation	Increases
MCH block grant	$686,000,000	(+$98,690,000)
ADMS block grant	1,405,670,000	(+137,000,000)
Family planning	162,000,000	(+17,689,000)

RURAL AMERICA

Beginning in fiscal year 1990 and continuing in fiscal year 1991, the Committee brought forth action plans to increase the available resources and improve access to health care services in communities throughout rural America.

In fiscal year 1992, the Committee finds a continuing disparity between the health status of Americans living in rural and urban areas. This is likely related to a disparity in income between rural and urban Americans. Many rural Americans simply cannot afford health care.

The Center on Budget and Policy Priorities has found that 26 percent of rural households had incomes among the poorest one-fifth of all U.S. households in 1987, and 51 percent of rural households fell in the bottom two-fifths. In contrast, 18 percent of urban households fell into the lowest one-fifth of U.S. households that year, and 37 percent of urban households fell in the bottom two-fifths.

The gap also exists among wealthier Americans: 23 percent of urban households fell into the most affluent fifth of American households in 1987, while just 11 percent of rural households were in this category. These differences in income are increasingly relevant to discussions of health policy, as evidence mounts linking income and health status.

The National Center for Health Statistics' annual national health interview survey indicates that a larger proportion of the rural population than the metropolitan population reports fair or poor health. For example, while the incidence of short-term illnesses is similar among both populations, the rate of restricted activity days—days on which a person must restrict ordinary activities due to illness—is greater among rural residents. They are more likely to suffer chronic health ailments, and more likely to incur injuries.

Yet rural people are less likely to receive routine medical care. From 1985 to 1987, rural residents in fair or poor health had fewer annual contacts with physicians than did residents of metropolitan areas who reported fair or poor health.

Similarly, while pregnant women in rural and urban areas are equally likely to suffer from conditions adversely affecting pregnancy, a smaller proportion of rural women receive adequate prenatal care. Pregnant women living in rural areas are more likely to begin prenatal care late in prenancy and to make less than the recommended number of prenatal visits. Rural children in fair or poor health see physicians less often than urban children in similar health.

Americans are increasingly concerned with the Nation's health care system. They are demanding that changes are made to ensure access to cost-effective quality health care across the Nation. Rural communities must not be forgotten in the search for change. Rural Americans need and deserve equitable, affordable, quality health care.

The Committee's initiatives in fiscal year 1992 are designed to provide such care. The Committee's fiscal year 1992 plan for rural America targets over $240,000,000 for various rural health and education initiatives.

A summary of these specific programs and allocations follows:

National Health Service Corps.—The Committee has increased funding for this program, which brings physicians, nurses, and other health care providers to underserved rural and inner-city areas. Funding for the National Health Service Corps totals $101,051,000.

Health services outreach to rural areas.—This program, begun in fiscal year 1991, provides funds for outreach programs to increase health and mental health services in rural areas. The Committee has provided $25,000,000 in fiscal year 1992.

Community and migrant health centers.—The Committee has increased the budget for community and migrant health centers to $581,891,000 in fiscal year 1992. The increase of almost $57,000,000 will further expand the scope of services at health centers and restore parity in funding between urban and rural grantees.

Primary care health professions and nursing programs.—The Committee has increased funding for programs that train primary care health providers, including area health education centers and border health education centers, primary care nurses, and allied health professionals. Full funding is recommended for interdisciplinary training for rural health care practice. Total funding for health professions training programs is $261,199,000.

Farm safety initiative.—The Committee has provided $22,700,000 to improve the health and safety of our Nation's farm families. This includes funds for surveillance, research, and intervention activities in order to substantially reduce the incidence of fatal and nonfatal traumatic injury and occupational diseases.

Rural health transition grants.—The Committee has included $25,000,000 for the program of rural health care transition grants. Grants of up to $50,000 a year for 2 years are awarded to small rural hospitals to help them develop and implement transition strategies that allow these hospitals to remain financially viable and thereby continue to provide health care services.

Essential access community hospitals and rural primary care hospitals.—The Committee provides $9,759,000 for this program, which provides grants to States to develop rural health care plans and designate hospitals and other health facilities as essential access community hospitals or rural primary care hospitals. EACH/RPCH facilities provide access to health care services in communities that otherwise would go unserved.

Rural and native American mental health research.—The Committee has cotinued its initiative in rural and native American mental health research with $15,000,000. Funds are to be targeted toward developing social work research models for family-centered treatment.

Office of Rural Health Policy.—The Committee has increased funding for the Office of Rural Health Policy to $5,000,000. This Office funds rural research centers, the National Advisory Committee on Rural Health, and State offices of rural health.

Rural aging.—To continue research on the rural elderly, which compromise almost one-third of the Nation's elderly population, the Committee included $1,000,000 to support two rural aging research centers at the National Institute on Aging.

Environmental health.—The Committee has included $750,000 in the budget of the National Institute of Environmental Health Sciences to expand research on chemicals most frequently encountered by farmers, farm families, and agricultural workers.

Nursing research.—Residents of rural areas often have limited access to health services due to the geographical isolation of communities and of individual families. Nursing services can be the most readily available and cost-effective means of reducing this geographic isolation and enhancing health care service delivery. The Committee has provided $2,000,000 to address the special health care needs of individuals residing in rural areas.

National Library of Medicine outreach.—The Committee has provided $6,000,000 to continue the NLM outreach effort for rural areas. These outreach efforts make available to rural health professionals up-to-date medical information. Without the NLM outreach, many of these professionals, who work in isolation, would be unable to keep current.

Rural education initiatives.—The Committee has provided a total of $10,000,000 for the rural component of the regional educational laboratories. These funds help the network of regional laboratories address the unique educational problems and curriculum needs of rural areas. In addition, the Committee has included $5,000,000 for rural technical assistance centers. These centers assist State and local education agencies in providing chapter 1 services to disadvantaged students in rural areas. Total funding for education initiatives is $15,000,000.

ACQUIRED IMMUNE DEFICIENCY SYNDROME [AIDS]

The bill includes a total of $1,933,751,000 for Public Health Service [PHS] program activities associated with AIDS. This is $57,595,000 more than requested by the administration, and $47,346,000 more than provided by the House. Not included in this bill, but also within the PHS, is $72,302,000 for the AIDS activities of the Food and Drug Administration [FDA], and $1,803,000 for the AIDS activities of the Indian Health Service [IHS]. Including FDA and IHS funds, the PHS total for AIDS activities is $2,007,855,000, a 6.5-percent increase over the 1991 amount. The appropriations for AIDS have increased since AIDS was recognized as a problem in 1982. The history of the appropriations are shown below:

Fiscal year:	
1982	$5,555,000
1983	28,736,000
1984	61,460,000
1985	108,618,000
1986	233,793,000
1987	502,455,000
1988	962,018,000
1989	1,301,012,000
1990	1,589,756,000
1991	1,885,175,000
1992	2,007,855,000

In addition to the amount the Committee expects to be spent by the PHS agencies in fiscal year 1992 on AIDS, the Federal Government will spend another $2,324,000,000 on AIDS treatment, testing, and research through Medicaid, Medicare, Social Security, and the Departments of Labor, Defense, Veteran Affairs, State, and Justice. In summary, the Federal Government will spend over $4,331,855,000 on AIDS in fiscal year 1992, an increase of $640,680,000 from the 1991 level of $3,691,175,000. The majority of the increases are for Medicare, Medicaid, and Social Security payments. The Federal Government spending for fiscal year 1992 is shown in the following table:

Public Health Service	$2,007,855,000
Medicaid (Federal share)	1,080,000,000
Medicare	280,000,000
Social Security Administration	439,000,000
Office for Civil Rights	3,000,000
Department of Veterans Affairs	335,000,000
Department of Defense	112,000,000
Agency for International Development	65,000,000
Department of Justice/Bureau of Prisons	7,000,000

Department of State	2,000,000
Department of Labor	1,000,000
Total	4,331,885,000

The table at the end of the report shows the amount included in the bill for each PHS agency and institute along with the 1992 amounts, the President's budget request, and the amount provided by the House.

Magnitude of the problem and response to date

HIV infection continues to be one of the Nation's major public health problems with an estimated 1 million Americans already infected. From 1981 through April 1991, CDC received reports of more than 174,000 AIDS cases and over 110,000 deaths. By the end of 1993, the cumulative total of AIDS cases in the United States is projected to reach 300,000 to 480,000 and result in 285,000 to 340,000 deaths. Because of the rapid increase in HIV incidence in the past decade, the number of deaths continue to increase each year; for example, from 131 in 1981 to 31,196 in 1990, representing a 238-fold increase in one decade.

The HIV epidemic is particularly devastating to young Americans. In 1988, AIDS was the third leading cause of death among men 25 to 44 years of age and the eighth leading cause of death among young women in the same age group. Based on current trends, it is estimated that AIDS may move up to second among young men and into the top five leading cause of death among young women. In New York and New Jersey, AIDS has been the leading cause of death since 1987 among young black women. In San Francisco, Los Angeles, and New York City, it is the leading cause of death among young men. In New York State, AIDS was the leading cause of death in 1988 among Hispanic children 1 to 4 years of age, and the second leading cause of death among black children in the same age group.

The Committee continues to be impressed with the progress made against AIDS. The number of AIDS clinical trial units has grown from 15 in 1986 to 47 and includes 15 pediatric units. The community programs for clinical research on AIDS has enabled more HIV-infected minorities to gain access to clinical trials. PHS researchers are evaluating the use of early intervention strategies in delaying the onset of HIV-related disease and prolonging survival and improving the quality of life of infected individuals. A number of experimental drugs are being tested against both the human immunodeficiency virus and the opportunistic infections that most commonly affect persons with AIDS. Every State has a HIV/AIDS prevention program and in fiscal year 1991, each State will receive service funds to address the needs of its citizens. PHS research has expanded efforts to develop, test, and evaluate vaccines and new therapeutic drugs, with increased access of minority populations to clinical trials, and increased involvement of community providers in clinical trials. Efforts to develop a vaccine are promising and this area continues to be a high priority. Prevention activities have been focused on programs that expand counseling, testing, and partner notification programs and their evaluation; programs targeting high- risk, out-of-school youth (homeless, runaways, et cetera), and IV drug abusers and their partners; increased education and training center initiatives to further train health professionals; and preventing perinatal infection.

Pediatric AIDS initiatives

The Committee again expresses its grave concern about the escalating pediatric AIDS problem in the United States. As of April 1991, over 3,028 cases of pediatric AIDS were reported to CDC. Of these cases, 1,581 or 52 percent have died. AIDS is now the ninth leading cause of death among children 1 to 4 years old, and the seventh in young people between ages 15 and 24. Pediatric HIV infection is a complex entity with a disease process which differs from HIV infection in adults, and as such requires specially tailored approaches to basic and clinical research, care, financing, and prevention. Basic research in pediatric AIDS and seroprevalence studies designed to monitor the problem should be continued and clinical trials should continue to be expanded. Total funding for pediatric AIDS increased 10.3 percent more than twice the rate of increase for AIDS funding generally. The following table displays funding for the last 2 years, and the fiscal year 1992 Committee recommendations:

PUBLIC HEALTH SERVICE PEDIATRIC AIDS

[In millions of dollars]

	Fiscal year—		Fiscal year 1992—		
	1990	1991	President's budget	Committee recommendation	Change
Health Resources and Services Administration	14.8	19.5	19.5	20.0	+0.5
Centers for Disease Control	27.7	42.4	42.2	42.2	....
National Institutes of Health	77.5	113.9	126.2	134.2	+8.0
Alcohol, Drug Abuse, and Mental Health Administration	12.4	14.0	15.2	15.2	....
Total	132.4	189.6	203.1	211.6	+8.5

Health Resources and Services Administration

HEALTH RESOURCES AND SERVICES

Appropriations, 1991	$2,108,742,000
Budget estimate, 1992	2,018,500,000
House allowance	2,137,533,000
Committee recommendation	2,389,882,000

The Committee recommends an appropriation of $2,389,822,000 for health resources and services. This is $371,322,000 more than the administration request, $252,289,000 above the House allowance, and $281,080,000 more than the fiscal year 1991 appropriation.

The HRSA appropriation supports programs that provide health care services to mothers and infants, the underserved, the elderly, the homeless, migrant farmworkers, and others. This appropriation provides Federal support for cooperative programs in community health, AIDS care, health care provider training, and health care delivery systems and facilities.

HEALTH CARE DELIVERY AND ASSISTANCE

Community health centers

The Committee has included $527,191,000 for the Community Health Centers [CHC] Program. This total is $49,000,000 more than the administration's request, $49,000,000 over the fiscal year 1991 appropriation, and $20,329,000 below the House allowance.

The Community Health Center Program provides primary health care services to some of the Nation's medically indigent population. During fiscal year 1991, some 530 community health centers will serve about 5,400,000 medically underserved persons. The Committee has provided funding above the administration's request in order to allow for new community health projects to be started. The Committee is aware of widespread need for and interest in funding new starts in urban and rural communities. The Committee is especially interested in providing grants to expand access to health care in States and regions that currently do not receive grants, such as Sioux City, IA.

HUD health service grants

The Committee recommends $4,692,000 for HUD health service grants. This amount is $1,692,000 above the administration request, $1,276,000 above the fiscal year 1991 amount, and $2,808,000 below the House amount.

First funded in fiscal year 1991, this program awards grants to community-based organizations to provide primary health and social services to residents of public housing.

Healthy Start

The Committee recommends $75,000,000 for the healthy start infant mortality initiative targeted to 10 areas. This amount is $44,330,000 below the House allowance, $63,659,000 below the administration request, and $50,000,000 above the fiscal year 1991 amount. Of the total, $50,000,000 will become available for obligation September 30, 1992.

The healthy start initiative will fund grants to 10 target areas, both urban and rural. Funds will support outreach and a variety of coordinated health and social services. The Committee supports HRSA's coordinating its bureaus in administering healthy start, and is pleased to see that the healthy start guidance requires applicants to collaborate with relevant State and local agencies responsible for health care and related services for women and children. The Committee believes that HRSA, in reviewing applications, should give priority to consortia that rely as much as possible on existing State and local infrastructure and systems that currently provide services required under healthy start. This will ensure minimum duplication of services and maximum benefit from funding.

HRSA will not award any of the healthy start funds provided in fiscal year 1991 until September 1991, thus allowing most of that funding to be used in fiscal year 1992. With the additional funding provided by the Committee for fiscal year 1992 and the advance funding allocated for fiscal year 1993, the Committee makes available $100,000,000 for healthy start over a period of 13 months.

Migrant health

The Committee has included $59,700,000 for migrant health centers. This amount is $7,977,000 above the administration request, the House amount, and the fiscal year 1991 appropriation.

Migrant health center grants fund primary health care services to migrants and seasonal farmworkers and their families. In fiscal year 1991, an estimated 500,000 migrants and seasonal farmworkers will be served.

The Committee is concerned over health care access barriers experienced by migrant and seasonal farmworkers and their families. A principal barrier to access is isolation and the lack of transportation. The use of mobile clinics can take health care services directly to farm labor camps or other locations convenient to farmworkers. The Committee is aware of a successful mobile health clinic in the Pacific Northwest and believes the delivery of health care in mobile medical clinics offers promise as a means of overcoming the access barrier.

The Committee has provided $2,000,000 for an outreach grant initiative to eliminate these barriers and improve access to health services for migrants. The grants shall support mobile medical clinic projects which provide a range of preventative and remedial medical and dental services. Preference in selecting the outreach grants should be given to proposals which will be ongoing, integrate the provision of health care through a consortia of existing providers and which involve an integrated approach to case management.

Black lung clinics

The Committee has included $4,000,000 for black lung clinics. This amount is $292,000 over the administration request, the fiscal year 1991 appropriation, and the House amount.

This program funds clinics that treat respiratory and pulmonary impairments in coal miners. The clinics reduce the incidence of high-cost inpatient treatment for these conditions.

Health care for the homeless

The Committee has included $61,041,000 for health care for the homeless. This is $2,000,000 below the administration request, $10,041,000 above the House allowance, and $22,005,000 above the fiscal year 1991 appropriation.

The health care for the homeless program provides for the delivery of primary health services, alcohol and substance abuse services, and mental health services to homeless individuals. The Committee has provided sufficient funds to maintain current level of services at the 110 project grantees. In addition, funds have been made available for expansion of the number of homeless health care projects. The Committee intends that $3,000,000 shall be made available to provide outreach and primary health services for homeless children, as authorized in section 340(s) of the Public Health Service Act. The Committee understands that several exemplary proposals were approved but not funded in fiscal year 1991. The Committee expects that in selecting new projects in fiscal year 1992, the Department will make awards based on the most meritorious proposals as determined by peer review.

Family planning

The Committee recommends $162,000,000 for family planning services. This amount is $12,000,000 above the administration request and $17,689,000 above the fiscal year 1991 appropriation. The House did not fund this program.

The Family Planning Program provides discretionary grant funds to States, local health departments, and private nonprofit groups to support voluntary family planning services, primarily to low-income women. No title X funds are used to provide abortion services.

The Committee concurs with the House Committee that no funds may be used to implement regulations limiting title X grantees from providing complete pregnancy counseling services. The Committee directs that no funds may be used to reorganize Public Health Service regional offices prior to the approval of a reprogramming request. In addition, the Committee directs continued use of the current formula for distributing all family planning funds.

National Health Service Corps

The Committee recommends $42,256,000 for the National Health Service Corps [NHSC] Field Program. This amount is the same as the fiscal year 1991 appropriation, the House allowance, and the administration request.

The National Health Service Corps improves access to health care services by placing health providers, including physicians, nurses, and others. Since its inception, the NHSC has placed over 13,000 health professionals in communities which otherwise would not be able to attract providers. The demand for medical personnel continues to vastly exceed the supply of available NHSC practitioners.

The Committee is concerned that obstetrician/gynecologists [Ob/Gyns] continue to be classified with other primary care physicians in the designation of health manpower shortage areas [HMSA's]. Because of a rising demand for and changes in obstetrical services over the past 11 years since HMSA's were defined, many areas are experiencing a severe shortage of Ob/Gyns despite the fact that they do not qualify under the current HMSA definition of a rational service area. The Committee believes that Ob/Gyns should be categorized separately from other primary care physicians and that separate criteria should be established for designating an Ob/Gyn HMSA.

National Health Service Corps recruitment programs

The Committee recommends $58,795,000 for the National Health Service Corps scholarship and loan repayment programs. This is $5,000,000 above the administration request, the same as the House allowance, and $10,000,000 more than the fiscal year 1991 appropriation.

The NHSC recruits health care practitioners to serve in health manpower shortage areas and community/migrant health centers through scholarships and loan repayment agreements. The program also makes grant awards to States to support State loan repayment agreements. At least 10 percent of the recruitment funds must be targeted to nurse-practitioners, physician assistants, and other nonphysician health providers. Included in this allocation is $2,500,000 for provider recruitment and education, as authorized in section 338G of the Public Health Service Act, and $2,500,000 for grants to State offices of rural health, as authorized in section 338J of the Public Health Service Act.

The Committee does not concur with the House Committee that funds be used for multiyear scholarships and Federal loan repayment agreements, rather than single-year. The Committee requests that the Secretary analyze both single-year and multiyear options, and report to the House and Senate Committees on the most beneficial method of maximizing these resources.

Hansen's disease services (Carville)

The Committee has included $19,489,000 for the Hansen's Disease Program, the same as the administration request and the House allowance, and $303,000 less than appropriation for fiscal year 1991.

The Hansen's Disease Program consists of the Gillis W. Long Hansen's Disease Center at Carville, LA, and the Contract Patient Care Program which provides for regionalized care for Hansen's disease patients on an outpatient basis. Research activities are being transferred to Baton Rouge, which will also be the site for delivering outpatient care.

Payment to Hawaii

The Committee has included $3,000,000 for the payment to Hawaii. This is the same as the administration's fiscal year 1992 request and the House allowance, and $383,000 below the fiscal year 1991 appropriation. Payments are made to the State of Hawaii to partially support the cost for care and treatment of persons with Hansen's disease. Federal support accounts for about 54 percent of the total cost of this Hansen's Disease Program.

Home health demonstration grants

The Committee recommends no further funds for the health care services in the home demonstration program. This is the same as the administration request and the House allowance. Funding provided for this program over the past 4 years totals over $13,000,000. The Committee expects to receive a report on the demonstration projects during fiscal year 1992.

State Alzheimer's pilot grants

The Committee recommends $5,000,000 for initial funding of the State Alzheimer's Disease Demonstration Program authorized by the Home Health Care and Alzheimer's Disease Amendments of 1990 (Public Law 101-557).

Growing numbers of patients and their families are being left virtually alone to cope with this tragic disorder. A report by the

Office of Technology Assessment entitled, "Confused Minds, Burdened Families," concluded that our Nation's social service system is poorly suited to deal with Alzheimer's disease. The funds provided are a small step toward improving supportive services for Alzheimer's disease patients and their families. By law, not less than 50 percent of each State matching grant shall be used to provide respite care to individuals with Alzheimer's disease or related disorders.

It is the Committee's intent that these funds support no fewer than 10 State pilot projects for planning, establishing, and operating supportive service programs for Alzheimer's patients and their families. The Committee expects that whenever possible States will work closely with local family support organizations in the design and implementation of these programs.

HEALTH PROFESSIONS

For health professions, the bill includes $273,199,000 which is $12,000,000 over the fiscal year 1991 appropriation, $26,341,000 below the House amount, and $185,144,000 over the administration request.

These programs attempt to ensure high-quality health care by competent practitioners by funding health professions schools and students, and by improving training opportunities for health care personnel.

The Committee finds it ironic that the administration is interested in increasing access to care in underserved areas and reducing infant mortality, yet repeatedly requests an end to all funding for the very health professionals who provide primary care, obstetric services, and preventive health care. Due to the severe funding restrictions facing the Committee in fiscal year 1992, it is not possible to provide the increases desired for health professions education programs. Therefore, the Committee has reallocated funds among health professions toward those that have the most acute personnel shortages nationally, and those that address the special needs of underserved areas. In addition, the Committee has increased loan funds available to health professions students.

The Committee believes there needs to be a shift in the types of health providers receiving Federal assistance toward those the provide preventive services and primary care, and encourages the authorizing committees for health professions education and graduate medical education to work toward this goal.

Exceptional need scholarships

The Committee recommends $9,759,000 for exceptional financial need scholarships. This is the same as the House allowance and the amount provided in fiscal year 1991 and $641,000 less than the administration request.

This program assists persons with limited resources to enter health professions training by providing comprehensive scholarship support. Priority is given to medical, osteopathy, and dentistry schools. The amount recommended by the Committee will provide scholarships to approximately 3,300 students.

Excellence in minority health education grants

The Committee recommends $14,140,000 for excellence in minority health education grants. This is $780,000 less than the administration request, $2,429,000 above the fiscal year 1991 amount, and $13,780,000 below the House.

This program was established to fund four institutions that have trained a significant proportion of the Nation's minority health professionals. Funds support students, faculty training, and the institutions. Additional funds over the fiscal year 1991 have been added to support newly authorized Hispanic and Native American Centers of Excellence. The Committee fully concurs with the House Committee about the importance of support for Meharry Medical College.

Public health special projects

The Committee recommends $4,557,000 for public health special projects. This amount is $800,000 above the House allowance and the fiscal year 1991 amount. The administration requested no funds for this program.

Grants are awarded to public health schools to plan, develop, demonstrate, operate, and evaluate projects related to preventive medicine, health promotion, and disease prevention; increasing enrollments of individuals from disadvantaged backgrounds; and to improve access and quality in health care.

Health administration grants

The Committee recommends $1,554,000 for graduate programs in health administration. This is the same as the appropriation for fiscal year 1991 and the House amount. The administration did not request funding for this program.

This program provides grants to public or nonprofit private educational entities, including schools of social work but not schools of public health, to expand and improve graduate programs in health administration, hospital administration, and health planning.

Public health traineeships

The Committee has included $3,416,000 for public health traineeships, the same as the fiscal year 1991 and the House amounts. The administration requested no funds for this program for fiscal year 1992.

This program provides grants to health professionals to pursue public health training. Traineeships support administrators, biostatisticians, and health planners trained to deal effectively with issues of quality, health care finance and cost containment, and efficiency in health care delivery.

Health administration traineeships

The Committee recommends $484,000 for health administration traineeships. This is the same as the appropriation for fiscal year 1991 and the House amount. The administration did not request funding for this program.

Grants are awarded to public or nonprofit educational institutions, excluding schools of public health, to support traineeships for graduate study in accredited programs in health and hospital administration, or health policy analysis and planning.

Preventive medicine residencies

The Committee recommends $1,654,000 for the Preventive Medicine Residencies Program, the same level as the 1991 appropriation and the House amount. The administration requested no funds.

This program provides funds to schools of medicine, osteopathy, and public health to assist in planning and operating residency training programs in preventive medicine. The program also provides financial assistance to residents who plan to specialize or work in preventive medicine.

The Committee is disappointed that schools of public health were not included among grantees or grant reviewers in fiscal year 1991. The Committee expects this oversight to be corrected in fiscal year 1992.

Family medicine residencies and training

The Committee recommends $32,000,000 for family medicine residencies for fiscal year 1992. This is $4,108,000 below the fiscal year 1991 appropriation and the House amount. The administration did not request funds for this program.

These funds support hospitals, medical schools, and students of family medicine. The funds provided will support all current grantees, and will allow approximately $1,000,000 for new programs. In addition, the Committee has added funds to the National Health Service Corps program to support primary care training and provide additional family physicians to underserved areas.

General dentistry residency training

The Committee recommends $3,834,000 for this program in fiscal year 1992, the same as the appropriation in fiscal year 1991 and the House appropriation. The administration did not request any funds.

This program supports residency training and advanced education in general dentistry. The funds provided will support all current grantees and will allow approximately $800,000 for new programs. The Committee urges the Department to consider funding approved-but-unfunded grants from prior year in fiscal year 1992.

General internal medicine and pediatrics

The Committee recommends $16,250,000 for general internal medicine and pediatrics programs in fiscal year 1992. This amount is the same as the 1991 appropriation and the House amount. No funds were requested by the administration for this program.

This program provides funds to hospitals and medical schools to support residencies in internal medicine and pediatrics. Grants may also include support for faculty. The funds provided will support all current grantees, and will allow approximately $1,300,000 for new programs.

Family medicine departments

The Committee has included $6,400,000 for family medicine departments. This is $431,000 less than the fiscal year 1991 appropriation and the House amount. The administration requested no funds.

This program provides grants to schools of medicine to establish and maintain academic administrative units to provide an administrative base for family medicine training.

Physician assistants

The Committee recommends $5,021,000 for physician assistant programs. This is the same as the appropriation for fiscal year 1991 and the House amount. No funds were requested by the administration.

These funds support planning, development, and operation of physician assistant training programs. Almost 40 percent of physician assistants practice in communities of less than 50,000, 66 percent practice in primary care settings, and about 33 percent practice in medically underserved areas.

Area health education centers [AHEC]

The Committee recommends $19,237,000 for area health education centers [AHEC]. This is the same as the fiscal year 1991 amount and the House amount. No funds were requested by the administration for this program.

Area health education centers help recruit and retain primary care practitioners in health personnel shortage areas by providing clinical training and education in these settings. AHEC's also provide continuing medical education.

Health education and training centers [HETC's]

The Committee recommends $3,904,000 for health education and training centers, the same as the fiscal year 1991 amount and the House appropriation. The administration requested no funds.

HETC's train physicians, nurse practitioners, physician assistants, and other primary care health personnel in areas with exceptionally low density population or exceptional needs, such as the Pacific basin, frontier rural areas, American Indian reservations, and settlements of recent refugees.

Health professions data analysis

The Committee has included $1,762,000 for health professions analytical studies and reports, the same as the appropriation for fiscal year 1991 and the House amount. The administration requested no funds for this program.

These funds are used to identify, designate, and review health professions shortage areas and mental health shortage areas throughout the country. One of the major products has been a biennial report to the President and the Congress on the status of health personnel in the United States.

Disadvantaged assistance

The Committee recommends $30,817,000 for disadvantaged assistance. This is the same as the appropriation for fiscal year 1991 and the House allowance, and $2,024,000 below the administration request.

Disadvantaged assistance funds grants to health professions schools that train underrepresented minorities and other students interested in pursuing a health career. Awards support recruitment, retention, and placement of students. Stipend support is available (20 percent of the amount appropriated) to over 500 disadvantaged students of exceptional financial need who are enrolled in a school of medicine, osteopathy, or dentistry.

Disadvantaged minority health improvement

The Committee recommends $10,734,000 for disadvantaged minority health improvement programs. This amount is $12,500,000 below the House allowance, the same as the administration request, and $2,440,000 below the fiscal year 1991 amount. Funding for all centers of excellence has been transferred to the "Excellence in minority health education" account.

These programs include scholarship grants; loan repayment for faculty service; grants to communities for scholarship assistance; and a data collection program.

Scholarship grants are made to health professions schools for student scholarships. Nursing scholarships account for 30 percent of these funds. Schools use up to 25 percent of the funds for undergraduates. In fiscal year 1992, $8,295,000 is provided for scholarships, the same as the fiscal year 1991 amount.

Loan repayment for faculty service funds repayment of education loans taken by individuals from disadvantaged backgrounds who agree to serve for two or more years as faculty of a health professions school. In fiscal year 1992, $976,000 is provided for loan repayment, the same as the fiscal year 1991 amount.

The grants to communities for scholarship assistance are awarded to community organizations located in health professions shortage areas, which can then provide financial assistance to health professions students in exchange for a service commitment. The Federal Government provides 40 percent of this scholarship assistance. In fiscal year 1992, $488,000 is provided for loan repayment, the same as the fiscal year 1991 amount.

Data collection, conducted through an agreement with CDC, funds health surveys of racial and ethnic groups. In fiscal year 1992, $975,000 is provided for data collection, the same as the fiscal year 1991 amount.

Minority health professions student loan [HPSL] initiative

The Committee recommends $14,928,000 for the minority HPSL initiative. This amount is $72,000 below the House allowance and the administration request and $12,000,000 above the fiscal year 1991 amount.

These funds provide a capital contribution to the HPSL for new loans to disadvantaged students. Low-interest HPSL loans offer students terms much more favorable than health education assistance loans, which the administration has proposed phasing out.

Allied health programs

The Committee recommends $4,000,000 for allied health programs. This amount is $2,341,000 over the House amount and the fiscal year 1991 appropriation. The administration requested no funds.

The Committee has provided a significant increase in order to increase the number of allied health graduates. Funds may be used to expand existing training programs or develop new ones, recruit individuals into allied professions with the most severe shortages nationwide, increase faculty recruitment and retention, and support innovative models of nontraditional training. The Committee recommends that grants awarded for allied health training target those professions experiencing the greatest shortages nationwide.

Interdisciplinary traineeships

The Committee recommends $5,000,000 for rural health interdisciplinary training projects. This is $608,000 over the House and the fiscal year 1991 amount. The administration requested no funds.

This program addresses shortages of health professionals in rural areas through interdisciplinary training projects that prepare students from various disciplines to practice together, and offering clinical training experiences in rural health and mental health care settings to expose students to rural practice.

Health professions special education initiatives

The Committee recommends $2,398,000, the same amount as the fiscal year 1991 appropriation and the House amount. No funds were requested by the administration for this program in fiscal year 1991.

This program supports grants to 2-year schools of medicine or osteopathy and projects at hospitals and podiatry schools for residency training in primary care. By law, 20 percent of the funds are reserved for 2-year schools and 25 percent for the Podiatric Residency Program.

Geriatric training and research

The Committee recommends $13,708,000 for geriatric projects. This is the same as the fiscal year 1991 appropriation and the House amount. The administration did not request any funds for this program in fiscal year 1991.

These funds are available for new or continuation awards under section 301 or 789(a) of the Public Health Service Act. Grants are made to establish geriatric education centers and to support geriatric training projects.

Pacific basin initiatives

The Committee recommends $2,608,000 for Pacific basin initiatives. This amount is $168,000 over the fiscal year 1991 amount and the House amount. The administration requested no funds for these initiatives.

Of the amount provided, $1,800,000 is for the Medical Officers Program, which provides training for approximately 125 Micronesian medical officers to provide primary health care coverage in the severely underserved areas of American Samoa and the Trust Territories of the Pacific basin. The remaining funds are for other Pacific basin activities, administered by the San Francisco regional office, to improve health services and provide technical assistance for projects in the Commonwealth of the Northern Mariana Islands, American Samoa, Guam, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau.

Native Hawaiian health care

The Committee recommends $3,600,000 for native Hawaiian health care services. This is $184,000 more than the House allowance and the fiscal year 1991 appropriation. The administration requested no funds.

Of the funds provided, the Committee intends that $800,000 be allocated for the Health Professions Scholarship Program administered by the Bishop Estate, $450,000 be used for administrative costs of Papa Ola Lokahi, and the remaining $2,350,000 be used to support the developing native Hawaiian health centers.

National practitioner data bank

The Committee has provided $5,000,000 for the national practitioner data bank, which is $3,074,000 over the fiscal year 1991 amount, the same as the administration request, and $2,000,000 below the House allowance. As requested by the administration, $5,000,000 in user fees collected by the data bank are to be used for the operation of the data bank.

The data bank was created by Public Law 99-660, to serve as a national source of information on malpractice judgments and settlements and various other disciplinary actions taken against physicians, dentists, and other categories of licensed health professionals.

The Committee concurs with the House Committee that the Department should issue a study of whether small malpractice payments should be excluded from the reporting requirements of the national practitioner data bank. Such a study was mandated to be issued by November 14, 1988, yet has not been received by the Congress. The Committee urges the Department to release the study within 6 months of the date of enactment of this act.

Nurse training

Advanced nurse education.—The Committee recommends $12,463,000 for advanced nurse training for fiscal year 1992. This is the same as the fiscal year 1991 appropriation and the House amount. No funds were requested by the administration.

This program funds nursing schools to prepare nurses at the master's degree or higher level for teaching, administration, or service in other professional nursing specialties. Grants may be used to plan and develop new programs or maintain or expand existing ones.

Nurse practitioners and nurse midwives.—The Committee has included $14,639,000 for nurse practitioner and nurse midwife programs. This is the same as the fiscal year 1991 appropriation and the House amount. No funds were requested by the administration.

This program supports programs preparing nurse practitioners and nurse midwives to work in settings such as the home, ambulatory and long-term care facilities, and other health institutions. These professionals are in especially short supply in rural and underserved urban areas.

The Committee is concerned that the distribution of funds under this program should reflect national shortages and relative need for each of the nursing specialties funded. The Committee requests that the Department prepare a report on the distribution of funds among nursing specialties relative to shortages of these professionals.

Special projects.—The Committee recommends $11,000,000 for nursing special projects. This is $468,000 more than the appropriation for fiscal year 1991 and the House amount. The administration requested no funds.

These projects support continuing education for nurses, geriatric training in preventive, acute, and long-term care, increase the supply of trained nursing personnel to meet the health needs in rural areas, demonstrate methods to improve access to nursing services in nontraditional settings, and demonstrate innovative nursing practice models designed to reduce professional nursing vacancies.

The Committee recognizes the importance of providing nursing training and education programs, especially in geriatric care specialties, in rural communities. The Committee encourages HRSA to support these efforts in rural southwestern Vermont.

The Committee supports continuing nurse training in the pediatric-EMS arena, and urges the Division of Nursing to continue to work with HRSA pediatric-EMS personnel. Noting the report by the Office of Technology Assessment on the health care needs of our Nation's adolescents, the Committee supports training projects in adolescent health.

Traineeships.—The Committee has included $14,151,000 for professional nurse traineeships. This is $487,000 over the fiscal year 1991 appropriation and the House amount. The administration requested no funds for this program.

Traineeships fund registered nurses in programs of advanced nursing education, including preparation for teaching, administration, supervision, clinical specialization, research, and nurse practitioner, and nurse midwife training.

Nurse anesthetists.—The Committee recommends $1,930,000 for nurse anesthetists programs. This is $500,000 more than the fiscal year 1991 appropriation and the House amount. No funds were requested by the administration for this program.

This program funds tuition, fees, stipends, and travel costs of students entering this field. Approximately one-half of all anesthesia care in the United States is provided by nurse anesthetists, and over two-thirds of nurse anesthetists deliver cost-effective services in small hospital settings in medically underserved areas.

Undergraduate scholarships.—The Committee recommends $2,380,000 for undergraduate nursing scholarships, which is the same as the fiscal year 1991 and House amounts. The administration requested no funds.

This program provides scholarships to full-time students to cover tuition and fees at participating schools. In return, students must serve at least 2 years in facilities experiencing nursing shortages.

Loan repayment for shortage area service.—The Committee recommends $1,455,000 for the nursing loan repayment programs. This is the same as the fiscal year 1991 the House amount.

These funds support two loan repayment programs. One repays loans in exchange for at least 2 years' service in a public hospital, community or migrant health center, a rural health clinic, an Indian Health Service health facility, a native Hawaiian health center, or a health facility determined by the Secretary to have a critical shortage of nurses. The other offers financial support to students in exchange for work in an eligible health facility for a time period as long as the period of financial support.

Nursing disadvantaged assistance.—The Committee recommends $3,416,000 for nursing disadvantaged assistance, which is the same as the House and fiscal year 1991 amount, and $744,000 less than the request.

This program provides grants to schools and other education programs to recruit individuals from disadvantaged backgrounds and assist them with nursing education by providing training, counseling, and stipends.

MATERNAL AND CHILD HEALTH AND RESOURCES DEVELOPMENT

Maternal and child health block grant

The Committee recommends $686,000,000 for the Maternal and Child Health [MCH] Block Grant Program. This is $98,690,000 over the fiscal year 1991 appropriation, $106,000,000 over the House amount, and $132,373,000 above the administration request for fiscal year 1992.

The MCH block grant funds are provided to States to support health care for mothers and children. According to statute, 15 percent of funds are used for special projects of regional or national significance [SPRANS]. The Committee concurs with the House Committee that none of the 1992 SPRANS funding shall be used to supplement the targeted infant mortality initiative, as proposed in the fiscal year 1992 budget.

The Committee intends that $1,000,000 be obligated for the continued expansion of the University Affiliated Program [UAP] network. At least one of the new programs shall operate from a consortium of institutions of higher education in a Southeastern State which has demonstrated competence and leadership through maternal and child health programs in reducing rural infant mortality and adolescent pregnancy, a primary cause of developmental disabilities.

Surveillance and health data.—The Committee believes that addressing the Nation's crisis in infant mortality and morbidity will require a detailed examination at the State level of perinatal and childhood health data to identify specific causes of infant mortality and other adverse pregnancy outcomes. Only in this way can appropriate, geographically focused, morbidity and mortality-specific intervention and prevention strategies be developed, implemented and evaluated.

To increase data collection, States will need to include the major causes of infant mortality and other adverse outcomes in their surveillance systems, and to link these data to a total infant mortality review process and other analytical efforts designed to identify problems and to suggest preventive strategies.

Thus, the Committee encourages development of State and community programs to identify barriers to care for women and children, including factors relating to the quality and appropriateness of care for babies born too small, too early, or with birth defects. The Committee believes that it is essential to be able to evaluate regional differences in access to, and quality of, care, especially for rural, minority, low-income and other historically underserved populations.

The Committee believes that coordinated regional efforts can provide education, preventive care, and advanced medical training and technology to save the lives of critically ill newborns. The Committee encourages the Secretary to support innovative networks that are addressing infant mortality on a regional basis, such as the neonatal network of Virginia and North Carolina, established by the Children's Hospital of the King's Daughters of Norfolk, VA.

Genetics and birth defects services.—Birth defects are the leading cause of infant mortality in the United States and the fifth leading cause of years of potential life lost. Morbidity associated with birth defects results in enormous health costs. It is clear that increased efforts to organize and deliver services to infants and children with birth defects and genetic disorders are needed.

The Committee notes the accomplishments of the Department in establishing regional public health/genetics and birth defects services networks. The Committee believes there is a need to increase support for these regional networks, and related genetics and birth defects services supported with SPRANS funds, and has provided an additional $4,000,000 to expand the efforts under this program.

Likewise, the Committee has added $4,000,000 to increase the support for sickle cell anemia, Cooley's anemia, and other hemoglobin disorder programs. The Committee recognizes that these conditions disproportionately affect minority populations such as African, Asian, and native Americans.

The Committee encourages the Secretary to expand research and training directed at maternal and child health and children with special health care needs (including early intervention training and services development), for genetic disease and birth defects testing, counseling, and information development and dissemination programs.

Pregnancy hazards information.—The States need to provide more effective systems to make information available to physicians, nurses, and other health care providers, and the public about the types of risks associated with avoidable hazards during pregnancy which can lead to birth defects and other adverse outcomes, including alcohol, dangerous drugs and exposures in the home and workplace. The Committee is pleased with past efforts by the Bureau of Maternal and Child Health to develop information resources regarding environmental hazards during pregnancy (sometimes referred to as teratogen information services) and seeks to ensure that these efforts continue and expand.

The Committee intends that at least $1,000,000 be used to fund essential national data bases to provide reliable health information regarding the effects of exposures to hazardous environmental agents during pregnancy. The Committee notes the outstanding programs in the State of Washington and in the District of Columbia which could be expanded with the assistance of the Centers for Disease Control, the Agency for Toxic Substances and Disease Registries, the Environmental Protection Agency, the National Library of Medicine, and other appropriate Federal resources.

Adolescent health.—The Committee has included bill language targeting $2,000,000 of MCH funds to establish a new Office of Adolescent Health at HRSA to fund projects implementing recommendations made by the Office of Technology Assessment in its recent report on adolescent health. The Committee urges the Department to establish a special blue ribbon advisory committee to oversee the office, and to ensure that projects funded combine education and health programs; for example, nursing school-administered clinics on school grounds.

Maternal and child health handbook.—The Omnibus Budget Reconciliation Act of 1989 authorized creation and distribution of a maternal and child health [MCH] handbook. The Committee provided funding in fiscal years 1990-91 to develop and distribute the handbook, in order to improve women's and children's health. Yet after 2 years, the handbook is not available. The Committee is concerned about this pace, and urges the Secretary to move ahead as expeditiously as possible with this important project.

The Committee continues to support early intervention for American Indian children on the Navajo Indian Reservation through home- and center-based care. The University of Utah has been funded to coordinate activities between the Navajo Nation and the States of Utah, Arizona, and New Mexico to develop culturally competent and developmentally appropriate early intervention services for handicapped children. The Committee strongly urges continued support for this project, and urges that efforts be targeted toward reducing infant mortality, which has increased by 50 percent on the Navajo Reservation in the last year.

Pediatric emergency care

The Committee has included $4,880,000 to continue the pediatric-EMS initiative. This is the same as the fiscal year 1991 appropriation and the House amount. The budget requested no funds for this activity.

Pediatric EMS projects demonstrate the effectiveness of a systems approach to prehospital emergency care, including prompt, appropriate onsite assessment and treatment of the child's problem together with rapid, safe transport to an appropriate medical facility.

Organ transplants

The bill includes $3,387,000 for HRSA organ transplant activities. The amount provided is the same as the administration request, $1,750,000 less than the House amount, and $336,000 less than the fiscal year 1991 amount.

These funds support development of a scientific registry of organ transplant recipients and kidney dialysis patients, and extend the national network to match donors and potential recipients of organs. A portion of the appropriated funds may be used for education of the public and health professionals about organ donations and transplants, and to support agency staff providing clearinghouse and technical assistance functions.

Health teaching facilities interest subsidies

The Committee recommends $450,000 for interest subsidies for three health professions teaching facilities. This is the same as the administration request and the House allowance, and $26,000 less than the fiscal year 1991 appropriation.

BUILDINGS AND FACILITIES

The Committee does not recommend funding for buildings and facilities in fiscal year 1992, the same as the administration request and the House amount, and $1,844,000 below the fiscal year 1991 appropriation. These funds have provided for routine repairs and improvements at the Gillis W. Long Hansen's Disease Center located at Carville, LA.

RURAL HEALTH RESEARCH

The Committee recommends $5,000,000 for HRSA's Office of Rural Health Policy. This amount is $861,000 more than the House amount and the budget request, and $326,000 over the fiscal year 1991 appropriation.

The funds provided will support the Office as the focal point for the Department's efforts to improve the delivery of health services to rural communities and populations.

These funds support rural health research centers, grants to State offices of rural health, the National Advisory Committee on Rural Health, and other projects. The Committee finds that use of telecommunications can improve rural health care, enhance educational opportunities, and support economic development. The Committee is impressed with the West Virginia pilot project to augment its medical access referral systems [MARS] program with two-way, interactive video consultation. The Committee has added $800,000 to support the statewide expansion of the West Virginia pilot project. This system will allow physicians and other health providers working in remote rural areas access to specialty consultation.

Health services outreach grants

The Committee provides $25,000,000 for health services outreach grants. This amount is $25,000,000 over the House allowance and the administration request, and $5,482,000 over the fiscal year 1991 amount.

Funds are awarded to coalitions of at least three health care providers to enhance the level of health services available in rural communities. Health providers share outreach workers who function as case managers to ensure that communities get the maximum level of service from existing providers and are able to serve as many patients as possible.

ACQUIRED IMMUNE DEFICIENCY SYNDROME [AIDS]

The Committee has included $326,194,000 for HRSA AIDS/HIV programs, including those authorized by the Ryan White Comprehensive AIDS Resources Emergency Act of 1990. This amount is $68,612,000 more than the comparable fiscal year 1991 appropriation and the fiscal year 1992 budget request, and $42,828,000 more than the House provided.

AIDS education and training centers

The Committee recommends $17,029,000 for AIDS education and training centers [ETC's], authorized under sections 301 and 788(a) of the Public Health Service Act. This amount is the same as the fiscal year 1991 amount, the House amount, and the budget request.

AIDS ETC's train health care practitioners, faculty, and students who care for AIDS patients, and support curriculum development on diagnosis and treatment of HIV infection for health professions schools and training organizations.

Facilities renovation

The Committee has not provided funds for facilities renovation. This is the same as the House provided. It is $4,029,000 less than the administration request and the fiscal year 1991 amount. These grants were used to support development of nonacute care facilities for AIDS patients. The Committee has used this funding for high-priority CARE programs.

Pediatric health care demonstrations

The Committee recommends $20,000,000 for pediatric AIDS demonstrations. This amount is $482,000 over the House allowance, the administration request, and the fiscal year 1991 amount.

These funds support projects to develop community-based, family-centered coordinated services for women, infants, and children who are infected with HIV or at risk of developing HIV disease.

The Committee is concerned that many pediatric AIDS demonstration projects are not yet providing comprehensive family-centered care to children, women, adolescents, and families with HIV disease. The Committee commends the Circle of Care project in Philadelphia, PA, which provides such comprehensive care and believes this is a model which should be replicated. Sufficient funding has been provided for the development and expansion of family-centered care, substance abuse services, and assistance with legal issues through expanding existing demonstration projects such as Philadelphia, San Antonio, and Los Angeles, which have exhibited expertise in these areas.

Ryan White AIDS programs

Emergency assistance

The Committee recommends $122,137,000 for emergency assistance grants to high-impact cities. This amount is $22,137,000 over the House allowance, and $34,306,000 over the administration request and the fiscal year 1991 amount.

These funds are provided to metropolitan statistical areas with more than 2,000 AIDS cases, and to metropolitan areas that have a per capita incidence of cumulative cases of AIDS equal to or greater than 250 per 100,000 population, as reported by CDC. In fiscal year 1991, 16 cities received emergency assistance funds. In fiscal year 1992, an additional two cities qualify for funding, bringing the total to 18 cities. One-half of the funds are awarded by formula and one-half are awarded through competitive grants.

Comprehensive care programs

The Committee has provided $122,137,000 for AIDS health care services authorized by title II of the Ryan White Comprehensive AIDS Resources Emergency Act of 1990. This amount is $30,318,000 over the House allowance, and $34,306,000 over the administration request, and the fiscal year 1991 amount.

These funds are awarded to States to support service demonstration programs, HIV planning activities, early intervention, home and community-based services, services for women, children, and families with HIV infection, drug reimbursement, technical assistance. Each State and territory receives a minimum grant to allocate in accordance with local needs and priorities. The remaining funds are distributed based on a formula that includes the number of AIDS cases diagnosed and reported for a given period as well as an adjustment of up to 25 percent based on per capita income. States must match Federal funds used for AIDS drug reimbursement.

Up to 10 percent of the total formula grant budget may be used to establish a program of special projects of national significance [SPNS]. These grants to States, localities, or community-based organizations fund special programs for health and mental health care and treatment of individuals with HIV disease. These might include supplemental grants to enhanced State service delivery models, or contracts with nationally recognized AIDS organizations or individuals to provide assistance to local community-based organizations with problems related to the delivery of health services to HIV-infected individuals.

In fiscal year 1991, the conferees directed that up to $3,000,000 within the amounts provided for SPNS be used to reimburse to dental schools and postdoctoral dental education programs for the uncompensated costs of providing oral health services to AIDS patients. The Committee intends that SPNS funds be made available to continue and expand the program begun last year.

The Committee notes that rural doctors are ill-equipped to care for the growing number of AIDS and HIV-infected patients in their communities, and often refer these patients to clinics in metropolitan areas great distances away. The Committee notes the success of telecommunications projects to improve rural access to education and training programs in rural areas, and encourages that SPNS funds be used to support statewide telecommunications demonstration projects that improve the provision of HIV health care in rural areas.

Early intervention program

The Committee recommends $44,891,000 for early intervention grants. This amount is $10,109,000 below the House allowance, and the same as both the administration request and the fiscal year 1991 amount.

These funds are awarded competitively to primary health care providers to enhance health care services available to people at risk of HIV and AIDS. Funds are used for counseling, testing, diagnostic, and therapeutic services.

PROGRAM MANAGEMENT/PROGRAM SUPPORT

Program management and direct operations

The Committee recommends $98,548,000 for HRSA program management and direct operations activities for fiscal year 1992, including AIDS. This is $2,303,000 below the administration request and $5,152,000 below the House amount. The amount provided is the same as the fiscal year 1991 appropriation level. The Committee has funded administrative accounts throughout the bill at the fiscal year 1991 level.

MEDICAL FACILITIES GUARANTEE AND LOAN FUND

Appropriations, 1991	$20,000,000
Budget estimate, 1992	19,000,000
House allowance	19,000,000
Committee recommendation	19,000,000

The Committee recommends $19,000,000 for the medical facilities guarantee and loan fund. This is the same as the administration's request and the House amount, and $1,000,000 less than the fiscal year 1991 appropriation. These funds are used to comply with the obligation of the Federal Government to pay interest subsidies on federally guaranteed loans throughout the life of the loans. These loans were used for hospital modernization, construction, and conversion.

HEALTH EDUCATION ASSISTANCE LOANS [HEAL]

The HEAL Program insures loans to students in the health professions. Interest rates are 3 percent over the rate for 91-day Treasury bills. Students collect 92 percent of their loan amount, with 8 percent used to pay an insurance premium into the student loan insurance fund [SLIF].

The Budget Enforcement Act of 1990 changed the accounting of the HEAL Program. One account will be used to pay 1992 obligations arising from loans guaranteed prior to 1992. This account is similar to the SLIF. A second account will be created to pay 1992 obligations and collect premiums on loans guaranteed in 1992 and after. Administration of the HEAL Program will be separate from administration of other HRSA programs.

The Committee provides $48,000,000 to liquidate 1992 obligations from loans guaranteed before 1992. This amount is the same as the House allowance, and $12,498,000 above the administration request, reflecting revised estimates of default claims.

In addition, the Committee provides $30,000,000 to pay default claims arising from loans guaranteed in 1992. This amount is $8,187,000 above the administration request, and the same as the House allowance.

For administration of the HEAL Program, the Committee recommends $1,500,000, the same as the administration request and the House amount.

VACCINE INJURY COMPENSATION

Appropriations, 1991	$154,080,000
Budget estimate, 1992	84,920,000
House allowance	84,920,000
Committee recommendation	84,920,000

The Committee recommends $84,920,000 be released from the vaccine injury compensation trust fund in 1992. This amount is the same as the House allowance, $500,000 above the administration request, and $69,160,000 less than the fiscal year 1991 amount. In addition, $80,000,000 in general funds are appropriated for compensation of vaccine-related injuries associated with vaccines administered before fiscal year 1989. This is the same as the House amount and $80,000 above the fiscal year 1991 amount. The administration requested no funds.

The National Vaccine Injury Compensation Program provides compensation for individuals with vaccine-associated injuries or deaths. Funds are awarded to reimburse medical expenses, lost earnings, pain and suffering, legal expenses, and a death benefit. The program is funded through an excise tax on the sale of selected prescribed vaccines. Revenues from the tax are maintained in a vaccine injury compensation trust fund.

In addition, $2,500,000 may be released from the trust fund to support HRSA's operation of this program. This amount is the same as the House allowance and the fiscal year 1991 amount, and $500,000 above the request.

Centers for Disease Control

DISEASE CONTROL, RESEARCH, AND TRAINING

Appropriations, 1991	$1,311,586,000
Budget estimate, 1992	1,396,927,000
House allowance	1,390,662,000
Committee recommendation	1,525,982,000

The Committee recommends an appropriation of $1,525,982,000 for the Centers for Disease Control [CDC], an increase of $129,955,000 over the administration's request and $214,396,000 more than the fiscal year 1991 appropriation. This is $135,320,000 more than the House allowance. The Committee also recommends 5,563 FTE's.

The Centers for Disease Control is the Nation's prevention agency. Although the current generation of Americans enjoys the longest life expectancy of any in the Nation's history, preventable illnesses and conditions still cause death, disability, and disease among many Americans. About one-half of the 2,200,000 deaths which occur in the United States every year are potentially preventable, as are many of the illnesses that affect millions of Americans. One national goal is to avoid having people become sick from illnesses and injuries due to preventable conditions.

CDC accomplishes its mission through grants, cooperative agreements, contracts, applied research, and technical assistance to States, localities, community-based organizations, and other entities. Three basic themes reflect the agency's priorities: strengthening the Nation's public health system; making prevention a practical reality; and investing in the health of children.

CDC has a major leadership role in the effort to address deficiencies in the public health system as noted in the Institute of Medicine report on the "Future of Public Health." The agency also has the lead responsibility for many of the year 2000 health objectives for the Nation. One of CDC's major responsibilities in accomplishing these objectives is to provide leadership to the Nation's disease prevention efforts.

INFRASTRUCTURE

The Committee is concerned that, since 1982, CDC's purchasing power for its infrastructure has slowly been eroding. The agency must not only have the resources to maintain its competence in areas such as cholera, rabies, and encephalitis, but it must also be prepared for newly emerging problems and emergency outbreaks. Should a new disease emerge, like AIDS in the early 1980's, CDC must maintain flexibility in its core funding to mount a timely and adequate response.

The Committee recommendation includes an increase of $13,478,000 over the request to address critical infrastructure needs. The Committee has included $1,500,000 to support the Epidemic Intelligence Service [EIS] Program. This 2-year program enables health professionals to attain proficiency in the practice of the study of diseases, both infectious and chronic, while providing service to States and localities. The Committee has included $4,400,00 to allow CDC to adequately respond to rarely occurring and newly emerging infectious diseases. The agency must be able to quickly respond to mosquito-borne outreaks of St. Louis encephalitis while still maintaining its ability to evaluate the potential threat of a new virus like the one recently introduced in monkeys imported for medical research. The Committee has also included $5,000,000 to continue efforts of comprehensive school health education. The key success in prevention is early education of our youth relating to all risky health behaviors that cause disease and early death. The Committee also has included $1,000,000 to respond to the increasing number of requests for health hazard evaluations. Many times the problems discovered in the evaluation provide advance warnings of new health problems that are occurring in the work site, and $2,078,000 to halt the erosion of the occupational safety and health research base. For example, during the last 10 years, there has been a serious reduction in the number and quality of research applications due to the general knowledge that resources are limited and that awards have not kept pace with inflation. The award rate for grant applications has dropped from 45 percent to 20 percent.

Preventive health and health services block grant

The Committee recommends $150,000,000 for the preventive health and health services block grant. This amount is $42,528,000 more than the request and $57,298,000 and 10 FTE's more than the 1991 appropriation level. The recommendation is $57,298,000 more than the House allowance.

This block grant provides States with funds for preventive health services to reduce preventable morbidity and mortality and to improve the quality of life. These funds are distributed through a population-based formula and are intended to give States flexibility to decide how funds will be used to meet the particular State's prevention priorities. Within the recommendation, the Committee has provided $142,000,000 for grants to enhance the States' capability to address the year 2000 health objectives for the Nation. The Committee has also provided $8,000,000 to provide grants to the States to assess the health status of their populations in order to develop a plan for achieving the year 2000 health objectives and for program operations to continue efforts at improved block grant reporting and to build the capacity of States to acquire sound and timely health data.

The Committee is concerned that at a time of rapidly increasing health care costs, Federal support for State and local disease prevention and health promotion programs, perhaps our best hope for controlling health care costs, has been severely reduced. While total spending on health care nearly doubled during the 1980's, the main program to support State and local disease prevention and health promotion programs, the PHHSBG, has been reduced by nearly one-half—from $169,000,000 to $96,000,000—not accounting for loss due to inflation. This has resulted in tremendous unmet public health needs at the State and local level and is severely limiting the Nation's ability to meet the Surgeon General's disease prevention and health promotion goals for the year 2000. While this increase does not bring the program back to its level of 1980, it does represent a significant reinvestment in prevention programs and should greatly assist the States and localities achieve the year 2000 disease prevention and health promotion objectives.

Prevention centers

The Committee's recommendation includes $6,000,000, an increase of $2,051,000 over the request and $1,663,000 over the fiscal year 1991 appropriation. This level of funding is $1,633,000 more than the House allowance.

These centers have produced valuable information from the development, implementation, and evaluation of applied prevention research. The Committee has included sufficient funds for the development of a new center and expansion of a current center to focus on developing improved health promotion strategies for individuals with disabilities. Sufficient funds have also been included for the CDC to develop a mechanism within the framework of the prevention centers to provide consultation and technical assistance to the Congressional Office of Technology Assessment [OTA] in evaluating the impact of Federal policy and legislation on health promotion and disease prevention.

The prevention centers program has funded the development of academic-based research and demonstration centers for disease prevention and health promotion. The Committee is convinced that effective prevention programs must be designed for high-risk individuals and population groups.

Sexually transmitted diseases

The Committee recommends $89,548,000 for the prevention and control of sexually transmitted diseases [STD], $4,580,000 more than the 1991 appropriation, the same as the budget request, and $4,580,000 more than the House allowance.

The Committee is disturbed that sexually transmitted diseases continue to be one of the Nation's most serious public health problems. Infectious syphilis has demonstrated increases unprecedented since the advent of penicillin therapy, resistant gonococcal infection is steadily increasing, chlamydial infections account for twice as many cases as gonorrhea, studies of human papillomavirus associate it with the development of cervical dysplasia, and trichomoniasis and other vaginal infections are being recognized as major potential contributors to premature birth. Over 12 million cases of STD, which primarily threaten the health of adolescents and urban minorities, are estimated to occur annually. Approximately two-thirds of those infected are expected to obtain services in public clinics in fiscal year 1992, resulting in the treatment of more than 625,000 gonorrhea, chlamydia, and syphilis patients and other potentially infected persons.

The recommendation includes $77,638,000 for grants and $11,910,000 for program operations. The Committee is shocked that, even though the case definition for congenital syphilis has been broadened, reported cases have still increased from less than 700 in 1988 to more than 7,000 in 1990. To address this problem, we have included an increase of $4,000,000 in grants to States and localities which will fund efforts to develop better techniques to reach women who do not receive adequate prenatal care to prevent congenital syphilis, including: ensuring syphilis screening in the first and third trimesters and at delivery for high-risk pregnant women; improving communications between STD programs and hospitals that deliver large numbers of high-risk infants to ensure that their mothers are screened for syphilis at delivery and that the infants of those who are positive are treated before they leave the hospital; and working with prenatal care providers and community-based organizations to identify high-risk mothers early in their pregnancy and to increase their utilization of prenatal care services.

The Committee is concerned about the morbidity and long-term sequelae of chlamydia trachomatis infections in women, which result in billions of dollars in health care expenditures each year. Chlamydia infections resulted in $1,400,000,000 in direct and indirect costs in 1987; three-quarters of this total was due to treatable, uncomplicated infections. These expenditures could be dramatically lowered if women were routinely screened for chlamydia as part of their regular gynecological care.

Chlamydia genital infection is the most frequent bacterial sexually transmitted infection in the United States. More than 4 million new chlamydia cases occur annually in the United States; 2.6

million among women. Chlamydia affects women in the prime of their reproductive life. More than 70 percent of these women have no symptoms or signs of infection, yet these silent infections can lead to fallopian tube damage from pelvic inflammatory disease or PID.

The Committee recognizes the tremendous need for establishing a national chlamydia screening program, and has included $2,000,000 to initiate this important program. Chlamydia screening, offered to women when they receive their regular primary care, will provide the best opportunity to identify infected women without syptoms, but before the damaging complications of chlamydia can occur. This program will promote coordination between current STD prevention activities and State and local family planning agencies to maximize its efficiency and potential impact. This integrated and multidisciplinary approach, which was shown to be so effective in the region X family planning chlamydia screening project, will serve as a model for other public health programs.

Immunization

The Committee recommends $277,845,000 for immunization activities which is an increase of $60,314,000 and 26 FTE's over the 1991 appropriation and $20,000,000 over the request. Of the total, $247,172,000 is for grants to States and localities to purchase vaccine and continue program operations. This is $20,000,000 less than the House allowance.

Appropriate administration of safe and effective vaccines remains the most cost-effective method of preventing vaccine-preventable diseases. The Committee is encouraged that the Public Health Service has placed immunization and infectious diseases in the 21 health objectives that will significantly reduce or prevent unnecessary morbidity and mortality.

The goals of CDC's immunization program are to eliminate indigenous wild-virus poliomyelitis (polio), measles, rubella, and congenital rubella syndrome [CRS]; to substantially reduce the health burdens caused by mumps, childhood meningitis, diphtheria, pertussis, and tetanus in the United States; to reduce the perinatal transmission of hepatitis B; and to assist the World Health Organization [WHO] in the global elimination of polio.

In fiscal year 1992, $247,172,000 has been included to continue the grant program. The recommendation provides $3,202,000 for estimated price increases, and $1,893,000 to restore vaccine purchases to the 1990 level. These funds will purchase the same number of vaccine doses as was purchased in 1990. The recommendation for immunization grants includes $18,737,000 to support State operations. These activities are essential to conduct an effective immunization program. In addition to the purchase of vaccine, States must distribute and administer the vaccines; ensure that proper procedures are in place for various population groups; develop and maintain systems to detect adverse events following vaccination; provide professional educational materials about the importance of vaccination; and recall patients for future immunizations to ensure vaccination is completed at the appropriate age.

The Committee has also included $3,102,000 in program operations to continue the support initiated in 1991 to assist WHO in the global elimination of polio by the year 2000. These funds will permit CDC to provide technical, laboratory, and programmatic assistance to WHO and its member countries. Global eradication of a vaccine-preventable disease such as polio will eliminate the need for, and therefore the cost of, vaccination. Direct long-term savings will continue to accrue at an estimated $300,000,000 annually.

The recommendation level also includes $21,470,000 in grants and $477,000 in program operations to assist States in controlling outbreaks of measles. CDC should continue to direct intensive efforts at this preventable public health problem. In 1990, over 25,000 cases of measles and 61 measles-related deaths were reported. This was the largest number of cases reported since 1978 and was more than 15 times the all-time low number of cases reported in 1983. The 61 measles-related deaths were the largest number in almost two decades and almost 25 times the average number of deaths reported during the 1981–87 period.

If measles outbreaks continue to decrease, or if savings occur as a result of price decreases, any unused funds may be used to purchase Haemophilus influenzae type b vaccine.

The Committee has provided an increase of $6,000,000 for a total of $42,912,525 for the purchase of haemophilus influenzae type B vaccine. This transfer will ensure that infants receive the three- or four-dose series of H-flu vaccine on schedule. This transfer is justified because measles outbreaks appear to be dying out. If this trend reverses and the number of measles cases begins to increase, the Committee will favorably consider supplemental funding for measles outbreak control.

The Committee has included $28,766,000 in grants and $3,941,000 in program operations to expand the public sector screening and immunization program initiated in 1990 to reduce the perinatal transmission of hepatitis B. Grant funds will support 100 percent of the public sector screening of pregnant women for hepatitis B and immunization of infants born to infected carrier mothers. This funding level will also allow initiation of universal immunization of about 20 percent of public sector children. Program operation funds will support in-house prevention research, diagnostic laboratory support, epidemiology, clinical studies, and provision of reference laboratory services for health departments.

The Committee provides $43,307,000 for improvements in vaccine delivery. This funding is intended to be used to improve the vaccine delivery infrastructure and should be targeted to areas that are experiencing breakdowns in vaccine delivery. The Committee rejects the administration recommendation that these funds be awarded to State and local health agencies which have been most successful in developing and implementing strategies to improve immunization levels among 2 year olds. The targeting of resources proposed by the adminstration could leave those States and cities in greatest need without any additional resources. The Committee believes CDC can target these additional funds to cities that are having measles outbreaks and suffering strains in vaccine delivery, and through aggressive oversight can prevent States and cities from using new Federal funds to replace State and local funds.

In addition, an increase of $5,000,000 has been included for vaccine application and evaluation activities. The Committee feels that it is essential for CDC to continually monitor how effective certain vaccines are in specific populations. The increase should focus efforts on recent advances in the fields of microbiology and immunology and how this information can be applied to vaccines. CDC should also begin to identify any promising vaccine candidates and begin appropriate evaluations of such vaccines.

In summary, the Committee does not concur with the administration's proposal to provide a reward to States that are doing well in immunization programs, but rather feels that the money could best be spent in helping all States to reach more individuals. Therefore, the Committee has provided $106,102,000 for vaccine, $22,934,000 for two dose measles, $15,947,000 for measles outbreak control, $32,707,000 for hepatitis B efforts, $2,928,000 for parent/patient notification, $2,928,000 for excise taxes on State-manufactured vaccines, $18,737,000 for State operations, $3,102,000 for polio eradication, $43,307,000 to develop a systematic approach to eliminate barriers in the area of vaccine delivery, $8,083,000 for CDC-based program operations, $6,300,000 for technical assistance related to vaccine delivery, $5,000,000 for vaccine application and evaluation activities, $1,300,000 for National Vaccine Program Office funded projects, and $2,470,000 for adverse events reporting.

Infectious diseases

For infectious disease activities, the Committee recommendation includes $49,579,000, an increase of $5,890,000 over 1991 and $4,400,000 over the budget request and the House allowance.

These activities provide a major aspect of the public health base vital to CDC's emergency response. The fiscal year 1992 level of activity will be essentially the same as that of 1991. Areas of concern supported by this activity include hospital infections, hepatitis B, bacterial meningitis, pneumococcal disease, Lyme disease, tuberculosis, infectious diseases in child-care settings, foodborne diseases, opportunistic infections, and infectious diseases of minority populations, and seldom occurring diseases.

There are many infectious diseases of very low incidence in the United States which pose a potentially serious public health threat when they occur. This group of diseases includes anthrax, plague, St. Louis encephalitis, yellow fever, and hemorrhagic fever, to name a few. With travelers becoming ill after returning to the United States and potentially introducing new diseases into the country, CDC's infectious disease program plays a key role in the prevention and control of new, emerging, and reemerging diseases in the United States and the world. The Committee wants to ensure that the expertise and the technology to identify these serious public health threats are maintained.

Tuberculosis elimination grants

The Committee recommendation includes $12,334,000 in tuberculosis grant funds. This is $3,225,000 more than the fiscal year 1991 appropriation, the same as the budget request, and $1,000,000 less than the House allowance.

Tuberculosis has been a curable and preventable disease for almost four decades; however, the numbers of cases have recently been increasing. The United States is at a critical period with regard to tuberculosis. The Committee is concerned that, unless action is taken to more aggressively attack the TB problem, it is likely to worsen.

CDC provides national leadership for tuberculosis elimination. In 1990, the efforts of 47 State, territorial, and metropolitan area health departments were supported through the awarding of TB cooperative agreements. Tuberculosis cooperative agreements allow States, territories, and major metropolitan cities to strengthen their control and elimination programs. These funds are used primarily to hire outreach workers to provide directly observed therapy to otherwise noncompliant patients. This allows patients to be cured without hospitalization thus eliminating their threat to the public. The majority of the workers hired are from the same ethnic and racial groups as the patients they serve. In addition, funds are used to support priority applied and operational research, educational, and training activities.

The increase of $3,225,000 will allow CDC to continue implementation of the highest priority items in the elimination plan. The Committee provides these funds to allow continuation and expansion of the tuberculosis cooperative agreements provided to State, territorial, and municipal health departments. Additional States and city health departments should be awarded funds, the number of outreach workers hired to supervise therapy for noncompliant patients should be increased, noncompliant patients receiving directly observed therapy should be increased, and more high-incidence States and city health departments should be assigned CDC program managers.

The State of Hawaii continues to have an extremely high incidence of recent immigrants, and recent CDC figures report that Hawaii possesses the second highest rate of tuberculosis in the Nation, with a rate of 17.1 cases per 100,000. Accordingly, CDC is directed to give greater priority to providing assistance to the State of Hawaii under its elimination, control, and treatment program. The Committee further understands that American Indians/Alaskan Natives have a tuberculosis incidence rate which is approximately five times the rate of whites. The Committee directs CDC to develop a special report for the Committee describing in detail its plans to address the needs of the native American community in a timely fashion.

Six percent of the population of South Carolina is infected with tuberculosis. This massive reservoir of potential cases has accumulated primarily among impoverished, medically underserved minority populations, and has produced adult and child tuberculosis rates persistently among the highest in the Nation. Accordingly, CDC should provide increased assistance to the State of South Carolina.

Chronic and environmental disease prevention

Included in the recommendation is $76,264,000 for chronic and environmental disease prevention, an increase of $19,600,000 over the budget request and the House allowance and $24,856,000 over fiscal year 1991 funding.

Significant premature death, preventable illness and disability, are caused by personal behavior choices leading to chronic diseases, and by exposure to man-made and naturally occurring environmental hazards. Prevention offers the major challenge and opportunity for averting a substantial portion of this unnecessary illness and death.

This bill includes an increase of $6,000,000 and 12 FTE's for efforts directed at smoking, for a total of $9,842,000 for the Office Smoking and Health. The Committee is concerned that smoking remains the single most preventable cause of death in the United States, causing 390,000 deaths per year alone. Most of those at risk from the ill health effects of smoking tend to be minorities, women, and the young. Studies have shown that smoking-cessation efforts can succeed in helping up to 40 percent of smokers quit. These successful programs should be expanded to specific populations such as minorities, women, and adolescents.

The Committee has also included an increase of $5,000,000 and 5 FTE's for a total of $14,739,000 to the recommendation for the continuation and expansion of the disabilities prevention program. The Committee expects that the entire increase provided over an inflation adjustment will be used to expand the number of States supported from 20 to 30 and to increase support to currently supported States. The Committee is pleased with the focus of the disabilities prevention program in coordinating State prevention programs and supporting expanded local efforts aimed at developmental disabilities, head and spinal cord injuries, and secondary disabilities. Because the Committee has included significant increases to programs aimed at the prevention of adult chronic diseases, it has not included funds to continue similar activities under the disabilities prevention program.

Spina bifida is a severe birth defect that can cause paralysis and death. The actual cause of this and related conditions is unknown. However, the Committee is encouraged about indications that multivitamins may prevent a large number of these birth defects. CDC has initiated a study that should give enough information to develop a medical recommendation. The Committee included $2,600,000 to continue efforts with Beijing Medical University in Northern China. In this particular area of China, multivitamins are not used and there is a high incidence of spina bifida and related complications. Thus, a true interpretation of the impact of multivitamin use can be determined.

The Committee is concerned about the effects of alcohol on unborn infants during pregnancy. Each year approximately 8,000 infants are born with fetal alcohol syndrome [FAS]—a totally preventable condition caused by alcohol. This damage caused during pregnancy is not reversible. The recommendation includes $2,000,000 and five FTE's for CDC to begin a program to assist States in FAS prevention, to evaluate the most effective ways to prevent FAS, and to improve the data on the number of newborns that are diagnosed with this condition each year.

The Committee also included an increase of $2,000,000 and five FTE's to strengthen CDC's prevention efforts related to all birth defects. Birth defects are the leading cause of infant mortality in this country, and the United States ranks well below other industrialized countries in this area. Each year, more than 100,000 infants are born with a serious birth defect. With funds provided, the

Committee expects CDC to monitor birth defects at the State level and begin an intensive program addressing the causes and prevention of birth defects.

The Committee recommends $1,000,000 for a demonstration of a model wellness community in Wheeling, WV. A computerized system will be utilized to improve the health of the participants and track lifestyle trends throughout the aging process. Users' workstations should be located throughout the community to attract ordinary citizens who will access and update their own health information over the course of their lives. The data base will be used by health personnel, researchers, and public health planners to: identify trends; compare health profiles; identify training needs; and for research to prevent disease and injuries and improve health.

Diabetes mellitus is one of the leading causes of death and major medical complications, such as blindness among adults, lower extremity amputations, and kidney failure, especially among minority populations. Diabetes accounts for more than 125,500 years of potential life lost each year, and the total cost associated with the disease is estimated to be $20,000,000,000 each year.

The Committee looks to CDC as the lead Federal agency for translating the important results of diabetes research into widespread public health practice and optimal care for our Nation's 7 million citizens with diabetes.

Also included is $5,500,000 and six FTE's for comprehensive school health programs. It is evident that with over one-half of the deaths from disease and injury in this country preventable, that health education holds the key to changing life styles to prevent many of these illnesses and injuries.

The Committee is encouraged by the progress CDC is making in arctic health prevention initiatives, including fetal alcohol syndrome and occupational safety and health, and is especially pleased with the cooperative 20-year relationship between the CDC laboratory in Anchorage and the Alaska Area Native Health Service in the area of infectious diseases. The Committee urges expansion of the current relationship with the Indian Health Service in Alaska, and exploration of joint projects with the University of Alaska in the future.

Chronic fatigue syndrome.—The Committee commends the CDC for the progress that is being made on the surveillance networking system. The Committee suggests that the CDC work to develop recommendations to the U.S. biomedical community standardized clinical data collection instruments and procedures for evaluation of functional health status in CFS, advise on the establishment of standardized protocols for CFS laboratory tests, and store sera and leucocyte samples from CFS patients for future testing. Some of this work can be cooperative with NIAID.

The Committee is concerned by the continued actions of CDC to maintain the Lyme disease case surverillance definition. Concern has been expressed that the criteria are too restrictive and are now proving to exclude many cases which do not display a particular set of symptoms. The lack of an increase in reported cases in 1990, following a doubling of cases for 3 years, 1987–89, has been used to support this claim. Since the new case definition was not adopted for use by the Council of State and Territorial Epidemiologists until January 1991, 6 months after the 1990 Lyme disease season, and some States reported increased numbers of cases in 1990 while other reported decreased numbers of cases, or comparable numbers as in 1989. CDC is instructed to review its surveillance definition after the 1991 Lyme disease transmission season, and adjust accordingly.

The Committee directs CDC to undertake a study to determine the health effects of volcanic haze on the residents of the Island of Hawaii, and in particular, the impact on children and those with respiratory diserases. The current eruption started in 1982, doubling the output of sulfur dioxide and particles in the last 4 years. The Committee strongly urges CDC to coordinate its efforts with the American Lung Association in Hawaii and the State Department of Health, which has been monitoring this important issue.

In the past, the Committee has expressed its concern that insufficient priority has been given to the public health hazards facing Hawaii and other residents of the Pacific Basin region due to the infestation of the Brown Tree Snake. This continues to be a major and increasing problem, especially to the children of Guam. Accordingly, the Committee urges CDC to establish a special working group to address this matter and to keep the Committee informed of its efforts. CDC should also work closely with appropriate officials within NIH and the Department of the Interior, as appropriate.

Childhood lead poisoning prevention

The Committee recommends $25,000,000 for lead poisoning prevention in children. This amount is $17,210,000 more than 1991, $10,051,000 more than the budget request, and $17,210,000 more than the House allowance.

Of the $25,000,000 provided for childhood lead poisoning prevention, $20,000,000 has been provided to expand the number of State and local health departments funded with categorical grants for childhood lead poisoning programs to no less than 30 and to increase support for those States or localities with severe lead contamination and toxicity problems. In addition, $2,000,000 has been included to conduct a national lead poisoning prevention education program to educate health professionals and paraprofessionals, parents, teachers, children, and other members of the general public concerning lead poisoning. A primary goal of this program should be to provide information to individuals about the health effects of low-level lead toxicity, the most serious causes of lead poisoning, and the primary and secondary preventive measures that may be taken to combat the problem of lead poisoning. Finally, $1,000,000 has been included for the CDC to enhance its research program to develop improved tests for lead toxicity that may be administered to children using methods that are sufficiently cost effective, reliable, and sensitive.

Breast and cervical cancer mortality prevention

The recommendation includes $50,000,000 for breast and cervical cancer mortality prevention. This is $20,741,000 more than the fiscal year 1991 appropriation and the same as the budget request and the House

In 1990, approximately 44,000 women died from breast cancer and 6,000 from cervical cancer. A major element in reducing illness and death from these cancers is early detection, through the utilization of proven screening tests, and subsequent followup and treatment. The number of women who are screened for breast and cervical cancer must be increased, the accuracy of screening tests (mammography, pap smear) must be ensured, and timely and effective interventions need to be provided.

The Breast and Cervical Cancer Mortality Prevention Act of 1990 (Public Law 101-354) established a program for the prevention and control of breast and cervical cancer mortality to carry out programs to: screen low-income women without private insurance or Medicaid; provide appropriate referrals for medical treatment of women screened; develop and disseminate public information and education programs; and improve the education, training, and skills of health professionals.

The Committee recommendation will allow States to implement comprehensive programs to include both direct and followup services. Of the $50,000,000, $40,000,000 is available for grants to States, and $5,000,000 is to be used for planning grants to assist States with little or no experience with these activities to develop a comprehensive breast and cervical cancer screening program.

Injury control

The Committee recommendation includes $28,066,000 for injury control efforts, $4,030,000 more than the 1991 appropriation and $2,000,000 more than the request level and the House allowance.

Within the increased funds, the 10 injury control research centers should, at a minimum be restored to the fiscal year 1990 12-month award level adjusted upward for biomedical research inflation of 4 percent per year.

Injuries are the leading cause of death and disability in children and young adults. They destroy the health, lives, and livelihoods of millions of people. Injury data show that: each year 150,000 Americans die from injuries; and 1 person in 3 suffers a nonfatal injury; injury is the leading cause of years of potential life lost [YPLL] before age 65, accounting for approximately 30 percent of all YPLL; and injury is the last major plague of the young. Injuries kill more Americans ages 1 to 34 than all diseases or conditions combined, and they are the leading cause of death up to age 44. Unintentional injuries constitute the fourth leading cause of death, killing approximately 100,000 each year, and accounting for 2.3 million years of life lost. Further, millions are incapacitated by injuries. For every death from injury, there are 16 persons hospitalized and another 380 persons who seek medical attention or have restricted activity due to an injury. In 1991, the total lifetime cost of all injuries sustained in 1985 was estimated to be $200,000,000,000. Productivity losses from injuries are far greater than those for cardiovascular diseases and cancer combined. Trauma patients represent 6.9 percent of all health expenditures, and trauma care makes up approximately 12 percent or $1,000,000,000 of the overall cost of uncompensated care.

Injury control, which involves prevention, provision of optimal medical care for trauma victims, and access to needed rehabilitative services, offers great promise for reducing morbidity, mortality, and health care costs. Therefore, the Committee recommends $1,000,000 to provide a grant to establish a new injury control training and demonstration center. The new training and demonstration center should have as its principal focus a level one trauma center that has established linkages with isolated, rural hospitals serving communities where economic conditions are depressed and where occupations, including underground mining, family farming, having an increased risk for severe injuries, are prevalent. It is essential for the center to have available 24 hours state-of-the-art telecommunications capabilities that would facilitate consultation with specialists, linkages to research centers and transmission of diagnostic imaging information. The center should have accredited residency programs encompassing the clinical specialists involved in trauma care. The training and demonstration center should include innovative teaching methods and training programs, applied research, development of population based trauma registry and other systems for injury surveillance, linkages to the injury control research centers already funded by CDC, as well as application and evaluation of interventions.

The Committee is concerned that although suicide is considered to be one of the major public health hazards facing our Nation today, there does not appear to be any systematic planning to address this problem, either for the adolescent population or the elderly. The Committee urges CDC to develop a special planning task force on this subject and to consider utilizing appropriate expertise, such as that of the Institute of Medicine.

Head injury is a major cause of death and lifelong functional limitations in children as well as adults. The Committee urges CDC to make head injury a priority in order to prevent and decrease the high incidence of mortality and morbidity in children, youth, and adults. The Committee urges CDC to focus on the implementation of the recommendations set forth by the Federal interagency task force report.

Occupational safety and health

The Committee has included $108,858,000 for occupational safety and health. This is $11,878,000 more than the fiscal year 1991 appropriation, the budget request, and the House allowance. Of this amount, $10,972,000 has been included for training.

Occupational safety and health programs are the first line of prevention for the approximately 110 million people who make up the American work force. These individuals spend a major portion of their days in the work environment. CDC is the agency with the responsibility for research related to occupational safety and health. This research is conducted and disseminated through the National Institute for Occupational Safety and Health [NIOSH].

The Committee is encouraged that it appears the number of fatal occupational injuries has gradually declined in recent years. Of the estimated 12 million injuries that occur annually among workers, about 3 million are severe and include approximately 7,000 deaths. However, the Committee is concerned that work-related illnesses and nonfatal injuries appear to be increasing. During 1987, permanent impairments suffered on the job grew from 60,000 to 70,000, total disabling injuries numbered 1.8 million, and combined occupational illnesses and injuries in manufacturing industries increased by 12 percent.

Those occupations with relatively higher rates of injury include mining, agriculture, construction, manufacturing, trucking, and warehousing. The largest numbers (as opposed to rates) of injuries occur in industries with large total work forces such as eating and drinking establishments, grocery stores, hospitals, trucking companies, nursing homes, department stores, and hotels/motels. While employees in occupations related to these enterprises comprise about one-fifth of the total work force, they report one-fourth of the injuries.

Prevention of occupational health hazards rests on the basic principles of control technology: engineering controls, work practices, personal protective equipment, and monitoring the workplace for emerging hazards. Despite the number of occupational injuries, effective prevention is practiced in many workplaces, and almost one-half of all establishments report no injuries in a given year.

Over 20 million Americans suffer from asthma, spending over $4,000,000,000 for health care services. Deaths attributed to asthma have doubled over the past decade. Black Americans are twice as likely to die from asthma as whites. Over 200 occupations, commercial substances, and industrial processes have been associated with the development of asthma. The Committee has included an increase of $2,500,000 and 12 FTE's to enhance its respiratory disease program directed to the elimination of the development of chronic pulmonary disease related to occupational asthma in U.S. workers. The program will include the development of a model State based surveillance system, development of tests, and use of state-of-the-art methodologies for evaluating workers and workplaces at risk for occupational asthma, development and verification of laboratory models for screening new materials for potential asthmogenesis, and development of engineering and process guidelines for asthma risk reduction.

NIOSH estimates that there are 12 million nonfatal injuries annually. Out of a total worker population of 117 million, over 4.5 million workers become disabled annually, resulting in payments of over $27,000,000,000 in workers' compensation claims in 1987 alone. Work related severe traumatic disabling injuries occur to approximately 3 million persons annually. These include often disabling injuries such as amputations, fractures, severe lacerations, eye loss, acute poisonings, and burns. Information and methods to prevent these unncessary disabling conditions is clearly needed. The Committee recommends $1,000,000 and eight FTE's to pilot test the expansion of the NIOSH field investigations program to include nonfatal injuries.

The Committee has included an increase of $1,000,000 and 10 FTE's to expand its Health Hazard Evaluation Program. Funding for this program has not increased and the request for such evaluations far exceed the resources. This increase should help NIOSH to respond to those increasing numbers of requests.

The Committee is concerned over increasing reports of Federal workers developing respiratory and other health problems that are related to sick building syndrome. NIOSH is encouraged to conduct health hazard evaluations to determine health and safety problems that need to be remedied. While the Committee strongly feels that Federal workers are entitled to protection, NIOSH is cautioned to use judgment so that it is not put in a position of responding to frivilous requests.

That Committee recommends that NIOSH support studies which will enhance understanding of work-related exposure of nurses to blood and bloodborne pathogens, including HIV. NIOSH should initiate studies on how work-related accidents involving nurses in acute care settings and long-term care settings can be prevented.

The Committee is concerned that research moneys provided by the OSHA agreement with John Morrell Co. remain unobligated. The Committee directs that these moneys be used for cooperative agreements between NIOSH and qualified organization and that such agreements be finalized no later than November 1, 1991. The cooperative agreement approach is directed because of the impressive resources and expertise available to NIOSH in the private sector, including both nonprofit and for profit organizations.

Agricultural health and safety.—The Committee has provided an increase of $3,200,000 and 15 FTE's for a total of $22,700,000 for farm health and safety. Included in this amount is an additional $1,200,000 for surveillance and intervention ($500,000 for the farm family health and hazard survey, which will begin the field portion of the survey in 1992, $500,000 for the Nurses and Rural Communities Program to expand this program to reach additional communities beyond the current 25 nurses in 10 States, and $200,000 for training of States to code death certificates for the purpose of mortality surveillance for targeting interventions to appropriate subsets of the agricultural community); an additional $1,500,000 for research ($500,000 to develop a greater regional representation and expansion of research centers in agricultural safety and health, and $1,000,000 to direct intramural research in NIOSH to particular target populations based on the results of the Surgeon General's conference in 1991); and an additional $500,000 for cancer control projects. Sufficient funding has been provided to complete the third year of the cancer control projects which were initiated in fiscal year 1990. Of the increase provided for cancer control projects, $350,000 is to expand the anticipated number of cancer screenings and the extent of the provider education and outreach activities concerning under this program in rural Iowa).

The construction industry has the third highest occupational fatality rate in the United States. There are an estimated 1.4 million nonfatal injuries in construction annually, and 428,400 disabling injuries. For the past 2 years, the identification of hazards in the construction industry and dissemination of that information needs added emphasis. Morbidity and mortality studies are needed to provide data concerning construction-related illnesses. The committee recommends an additional $2,000,000 and 10 FTE's to continue this expanded focus for construction workers.

The Committee has included $800,000 to expand NIOSH activities addressing musculoskeletal disorders among carpenters. Musculoskeletal disorders, in particular cumulative trauma disorders, are the most common and preventable injuries among active construction workers and represent the largest injury-related cause of spiraling workers' compensation costs. The program will include the establishment of a surveillance program; an examination of work practices and of worker compensation records; the establishment of training programs and demonstration projects concluding with the eventual development of comprehensive intervention and prevention plans.

The Committee was pleased to learn of NIOSH's efforts during the past year to work with the American Psychological Association in order to reduce workplace injuries and job related stress. According to NIOSH, psychologic injuries are one of the leading causes of death and disability in the Nation. The Committee urges NIOSH to continue its efforts in this particular area. The Committee would be especially supportive of postdoctoral psychological training initiatives targeted toward developing expertise in preventing workplace injuries and the reduction of occupational stress. While occupational stress issues directly impact American economic competitiveness, the Committee is concerned that historically, relatively little has been undertaken in this area. The Committee encourages NIOSH to make funds available for workplace stress initiatives, that a focus be given to: knowledge of working conditions and worker populations at risk for job stress; better understanding of the health effects and related social and economic costs of job stress; and ways to control stress, including job redesign.

Training.—The Committee has recommended $10,972,000 in training moneys, an increase of $500,000 over fiscal year 1991, the budget request, and the House allowance. NIOSH is encouraged to provide training specifically related to hazardous materials emergency response.

Epidemic services

The Committee recommends $79,728,000 for CDC's epidemic services activities, $1,500,000 more than the request and $11,014,000 and 20 FTE's over the fiscal year 1991 appropriation. The House allowance is $6,014,000 less than this recommendation.

Epidemic services are an integral part of this Nation's approach to protecting the population from outbreaks of diseases and misuse of chemicals and biological agents. These programs are carried out by maintaining surveillance systems, conducting epidemic investigations, sustaining laboratory capabilities for identifying and investigating potential problems, collecting and analyzing data, and recommending appropriate actions to protect the health and lives of the American people.

Bringing public health problems to rapid and successful conclusions prevents costly morbidity and mortality. Even without considering the human factor involved, the cost-effectiveness of these epidemic services has been well documented. Activities continue to range from identifying cases of food poisoning from contaminated food to the large investigations, such as legionnaires disease, and toxic shock syndrome. The Committee emphasizes the importance of CDC continuing to provide the United States with a ready and competent staff to travel to any part of the world to investigate epidemics which impact on the health of the U.S. population.

The Committee is concerned at the lack of trained epidemiologists, especially at the State and local level. Epidemiology is the study of patterns and causes of diseases in the community. Physicians diagnose and treat health problems in individuals; epidemiologists diagnose and recommend prevention measures for health problems in the community. These individuals work on disease epidemics as well as major causes of illness and death such as heart disease, cancer, and injuries. By one estimate, the Nation's current supply of epidemiologists is approximately 4,600—a little less than one-half of the 9,600 needed. CDC is the only Federal agency addressing this need in a systematic training program. CDC's EIS program is 2 years of inservice and on-the-job training in applied epidemiology. Created in 1951, CDC's program has graduated over 1,800 public health professionals trained in epidemiology, and these trained public health specialists are now in virtually every State health department. CDC's EIS personnel serve at the forefront of disease investigations prevention, and control. To meet the increased demand by States for epidemiologists, the Committee has included an additional $1,500,000 and 20 FTE's to expand the EIS program.

The recommendation includes an increase of $5,000,000 and 15 FTE's for CDC's infant health activities. Activities should include surveillance and epidemiologic investigations, technical assistance in program development and evaluation to reduce perinatal, neonatal, and postnatal mortality and morbidity associated with low birthweight [LBW], sudden infant death syndrome [SIDS], birth defects, prematurity, and complications of pregnancy. These health problems account for over 1.9 million years of potential life lost each year. In partnership with States, efforts should be directed toward reducing adverse pregnancy outcomes by identifying risk factors and applying appropriate interventions to reduce those risk factors.

The Committee has learned of the inconsistency throughout the States with respect to standard autopsy and reporting protocol for unexplained infant deaths, or sudden infant death syndrome. To improve upon this situation, the Committee recommends that the HHS interagency SIDS panel review and establish updated standard death scene protocol for sudden infant death syndrome incidents. The Committee encourages the interagency panel to utilize input and advice from medical examiners, coroners, forensic and pediatric pathologists, epidemiologists, experts in the SIDS field, and State jurisdictions that have had success in implementing standard protocols.

The Committee views CDC as the lead Federal agency in disease prevention efforts. In order to conduct research and development efforts on general issues related to disease prevention and health promotion, CDC must take a more aggressive approach in determining what technologies are cost-effective and in building consensus in the role of prevention and health promotion in national health programs. In order to make prevention real—in other words, to assure that prevention becomes an integral part of the Nation's health system—additional information and data are needed to help establish and secure the effectiveness of proposed interventions. The recommendation includes $2,000,000 for CDC to conduct research and development efforts on general issues related to disease prevention and health promotion. This program will help CDC to assess prevention technologies and evaluate what really works and to adapt methods to all population groups and health care settings.

Health statistics

The Committee recommends $85,206,000 for health statistics, the same as the budget request and $14,800,000 more than the 1991 appropriation. Of the total, $33,800,000 will be supported from the use of PHS 1 percent evaluation funds for health statistics activities. This recommendation is $8,800,000 more than the House allowance.

The National Center for Health Statistics is a national resource for understanding and improving the health of the American people. Among the most readily recognized data from NCHS are such indicators as the leading causes of death, infant mortality, life expectancy, nutritional status, and the changing patterns in the use of health services and technology. Information from the NCHS data systems has formed the basis for "Health, United States," the Secretary's annual report to the Congress.

The Committee is also aware that CDC, through NCHS, plays a key role in supporting programs throughout the Public Health Service. NCHS works closely with the PHS agencies in the design, support, and analysis of its surveys, and participates in a number of priority Governmentwide efforts. The existence of high quality health data allows many research and service programs to target resources more effectively. NCHS data systems are tailored to address specialized topics within the mandate of each of the PHS agencies.

The recommendation includes full funding for all major NCHS surveys and data systems and will also provide funding to implement long overdue improvements in timeliness and quality of health data and improvements in the access to that data. The Committee cannot stress enough the need for timely data on the health status of the American people and considers this a high priority. CDC should report to this Committee prior to the upcoming fiscal year 1993 appropriations hearings on the success of implementing this program.

The Committee is concerned that the statistics developed by CDC do not accurately reflect the ethnic diversity of the State of Hawaii. Native Hawaiians, for example, have extraordinarily severe health care needs, as do American Samoans. CDC's reporting aggregate figures for the State as a whole does not accurately reflect these special needs. CDC should work closely with the State of Hawaii to ensure that accurate data is reported in the future.

Human immunodeficiency virus

The Committee's recommendations include $480,000,000 for HIV/AIDS activities, $14,660,000 less than the request, the fiscal year 1991 appropriation, and the same as the House allowance.

The HIV epidemic is particularly serious among young Americans. In 1988, AIDS was the third leading cause of death among men 25 to 44 years of age and the eighth leading cause of death among young women in the same age group. Based on current trends, it is estimated that AIDS may move up to second among young men and into the top five leading causes of death among young women. In New York and New Jersey, AIDS has been the leading cause of death since 1987 among young black women. In San Francisco, Los Angeles, and New York City, it is the leading cause of death among young men. In New York State, AIDS was the leading cause of death in 1988 among Hispanic children 1 to 4 years of age, and the second leading cause of death among black children in the same age group.

Homosexual men still constitute just under 60 percent of cumulative adult AIDS cases reported since 1981. However, homosexual/bisexual males represented only 55 percent of the new cases in the past year—a decrease of just over 4 percentage points. Injecting drug users [IDU's) represented more than 23 percent of new AIDS cases in 1990, although 32 percent of reported adult and adolescent cases of AIDS were among persons who reported having injected drugs or having sexual contact with IDU's. In addition, 59 percent of the AIDS cases reported in 1990 among blacks and Hispanics were in persons who reported having injected drugs or having sex with IDU's. Blacks and Hispanics constitute 44 percent of the cumulative adult cases and 77 percent of the pediatric cases. To date, more than 16,000 cases of AIDS have been reported in women. This total represents 10 percent of the cumulative adult/adolescent cases reported, although women represented 11 percent of all reported AIDS cases in 1990. This figure represents a 34.4-percent increase in cases among women over the previous year, compared to a 21.7-percent increase in cases among men for the same time period.

The budget request states that it supports a comprehensive program to prevent and control the spread of HIV infection in the United States and, therefore, the Committee is comfortable with the recommended level of funding. The program primarily encompasses surveillance, population-based research, and information and education/preventive services.

The Committee disagrees with the administration's proposal to provide HIV/AIDS counseling, testing, and partner notification funds under the Ryan White Comprehensive AIDS Resources Emergency Act of 1990 [CARE]. As a result of this change, more than 40 States will receive less money in 1992 than they did in 1991. In addition, CARE requires that at least 35 percent of funds be spent for other clinical, diagnostic, and therapeutic HIV services. Many States have told the Committee that this would greatly reduce their ability to provide counseling, testing, and partner notification services and would require separating trained health employees. It is important to have a system in place where people can receive counseling and testing to determine whether they have HIV infection, and then provide partner notification services so infected persons can change their behavior to stop further transmission of the disease and seek treatment for themselves.

A significant cause of the increase in tuberculosis cases in the United States is its active manisfestation in persons with the AIDS virus. The Committee recommends that of the funding provided to

CDC to combat AIDS, at least $9,000,000 be utilized to deal with the TB/AIDS problem.

The Committee continues to believe that prevention funded through community based organizations is a critical means for reaching the diverse populations affected by this epidemic. Emphasis should be given to funding organizations with strong ties to those local populations targeted by education programs.

The Committee directs that the $102,000,000 provided for counseling and testing should continue to be awarded as in the past and has removed title XXVI from the bill language.

Since the level of funding for HIV/AIDS has been reduced, the Committee has not included directives requiring new initiatives.

The Committee is aware of a demonstration program supported by CDC and implemented by the Foundation of Pharmacists and Corporate America for AIDS Education to educate pharmacists about AIDS and HIV-related conditions. The community pharmacy represents an untapped potential for the dissemination and discussion of education and prevention information concerning AIDS. The Committee understands that there is strong interest within the industry to provide significant matching funding for expansion of this initiative. Therefore, the Committee encourages CDC to expand its support of projects to develop pharmacy based AIDS education and prevention.

The Committee recommendations include $142,401,000 for epidemiology and surveillance, $102,000,000 for counseling, testing, and partner notification grants to States and cities, and $250,259,000 for other information, education, and prevention services.

Buildings and facilities

The Committee includes $38,338,000 for buildings and facilities, $32,000,000 more than the House and $30,000,000 more than the request.

The Committee is aware that the number of repairs and improvements [R&I] to CDC facilities have been dramatically increasing in recent years. Of the $38,338,000 provided, $8,338,000 is included for CDC to begin to maintain its facilities on a current level without increasing the backlog of R&I projects. This increased level of funding for ongoing maintenance should meet the actual cost of ongoing repairs necessary to maintain the CDC facilities. This recommended level is based upon the formula established by the Public Health Service to fully fund maintenance of facilities that are in inadequate condition.

The remaining $30,000,000 is for construction, renovation, and related costs associated with the new state-of-the-art occupational safety and health laboratory. Partial funding was provided in fiscal years 1990–91 for architectural and engineering work, site preparation, and some construction was provided in fiscal year 1990 and for this facility.

Program management

For program management, the Committee recommends $3,016,000, the same level provided in fiscal year 1991, $293,000 less than the budget request and the House allowance. This activity provides for the overall management and direction of the programs and activities of the Centers for Disease Control.

The Committee disagrees with the administration's deletion of language on reporting of State assignees. States and localities are very supportive of this mechanism to obtain experienced public health professionals in lieu of grant funds.

The Committee has reinserted bill language that provides that certain CDC employees assigned to States and municipalities, as well as certain employees of the National Center for Health Statistics, shall be treated as non-Federal employees for reporting purposes only.

NATIONAL INSTITUTES OF HEALTH

The bill includes $8,959,533,000 for the 20 appropriations which together fund the programs of the National Institutes of Health [NIH]. These appropriations are for the 13 research institutes, the National Center for Research Resources, the National Center for Nursing Research, the National Center for Human Genome Research, the John E. Fogarty International Center, the National Library of Medicine, the Office of the Director, and building and facilities.

The amount provided is the same as requested by the administration with the exception of the $184,647,000 added to the National Cancer Institute on a delayed basis to adjust for the effects of inflation since 1980. Additionally, the Committee has reflected Senate priorities by a reallocation of $151,000,000. This $151,000,000 is made available by capturing $55,000,000 of indirect cost savings, concurring with the House on the amounts provided for research training and applying a small percentage reduction to each institute, center, and division. The specific amounts with appropriate comparisons are shown in the table at the end of the report.

NATIONAL CANCER INSTITUTE

Appropriations, 1991	$1,713,759,000
Budget estimate, 1992	1,810,230,000
House allowance	1,830,509,000
Committee recommendation	2,010,230,000

The Committee recommends an appropriation of $2,010,230,000 for the National Cancer Institute [NCI]. This is $200,000,000 more than the administration request, $296,471,000 more than the 1991 appropriation of $1,713,759,000, and $179,721,000 more than the House allowance.

The National Cancer Institute supports basic and applied research and research training into the prevention and control, early detection, diagnosis, rehabilitation, and treatment of cancer. The three foundation stones underpinning NCI's research efforts are basic research, clinical trials, and cancer centers.

The Committee notes that this year marks the 20th anniversary of the National Cancer Act, legislation which committed the Nation to a public/private partnership of research, education, and prevention. Testimony received from many witnesses has highlighted that progress in cancer research has been realized in many areas and that a significant reduction in death rate for some cancers, primarily in people under age 65, has been achieved. Today, there are an estimated 7 million cancer survivors. Deaths from childhood cancers have decreased since the passage of the National Cancer Act. In addition, dramatic increases in survival rates have been realized for individuals suffering from testicular cancer, lymphoma, Hodgkin's disease, and others. Nevertheless, additional progress is needed to bring down the high incidence rates of many cancers.

Funding increase

The Committee has added $184,647,000 to NCI over the level requested. With these funds which are provided for obligation on or after September 30, 1992, the Committee expects that they will be used to maintain a balanced program in our cancer research efforts and address crucial priorities in cancer research that will provide the necessary knowledge to successfully address the increasing incidence and death due to cancers which commonly afflict men and women, especially older Americans and minorities. These funds were added to adjust for the effects of inflation which have resulted in a loss of buying power of 6 percent since 1980.

Funding mechanism

Emphasis on the number of new and competing awards must not jeopardize funding mechanisms that advance scientific progress. The Committee is distressed that NCI is considering eliminating program project grants [PO1's] in an effort to demonstrate an overall greater number of awards. The PO1 mechanism has played an essential role in the transfer of basic research findings to bedside practice. It is a mechanism that allows numerous investigators on a single grant to receive Federal support. The Committee recognizes that funding limitations make it difficult to both support PO1's and reach the target levels set for new and competing awards and, therefore, feels that numerical goals for grants should not force the elimination of useful mechanisms of research.

Focus on dissemination

The Committee supports the use of traditional investigator-initiated grants, particularly research project grants to facilitate the rapid translation of state-of-the-art prevention and treatment research conducted through clinical trials into widespread clinical practice. The NCI should also seek alternative means to disseminate important research results from clinical trials to reduce the delays associated with the publication of clinical data in major peer-reviewed journals.

Cancer centers

A strong cancer centers program is essential to the NCI. The NCI will continue to support excellent centers and will seek to achieve greater geographic diversity. The Committee urges that, within available funds, there be no reduction in the number of centers and that centers be provided with appropriate inflation adjustments.

The Committee learned that funding for NCI-supported cancer center core grants has decreased by 14 percent between 1980–91, measured in 1980 constant dollars. And yet, it is the administration's position that the diversity and strengths of the cancer centers represent the most reliable and most productive research and outreach element of the national cancer program, and furthermore than 50 percent of all the laboratory and clinical trials supported by the NCI take place in institutions with cancer centers across the Nation. Several years ago this Committee requested a study of the NCI cancer centers program by the Institute of Medicine, which recommended that the National Cancer Institute strengthen its core support of cancer centers in order to exploit fully the application of these advances in the prevention and treatment of cancer and its consequences. The Committee expresses its serious concern about this matter and urges the NCI to take appropriate budgetary actions to remedy this situation. Appropriate portions of the increases for the NCI should be used for this purpose.

Women's health

The Committee strongly believes that women's health issues represent one of the NCI's highest priorities. To support that priority, the Committee has provided a $40,000,000 increase over the levels requested for an expanded research effort focused on breast, ovarian, and cervical cancers. The Committee urges that this priority be reflected throughout the NCI's basic research efforts, education and information dissemination activities, cancer centers, and the proportional representation of women in all NCI-supported clinical trials. The NCI will participate, along with other major categorical Institutes, in the trans-NIH healthy women's study to address the morbidity and mortality associated with cancer, cardiovascular disease, and osteoporosis in women. Considerable progress has already been achieved in certain cancers which affect women under age 65. In order to extend these benefits to all women, particularly those over age 65, poor women, or women from certain minority groups, the NCI will continue its outreach efforts through community-based programs, the cancer centers program, the clinical cooperative groups, and the Cancer Information Service.

Breast cancer

The Committee directs that not less than $132,000,000 be available for breast cancer research, at least $30,000,000 more than requested.

The Committee is very concerned about the rising incidence of breast cancer among women. In 1990, 1 woman in 10 could expect to develop breast cancer. This year a woman's chances of being diagnosed with breast cancer have increased to one woman in nine. This means that 175,000 women in the United States will be diagnosed with the disease. Over the last 10 years the incidence of breast cancer has increased by more than 33 percent. Equally alarming is the fact that the mortality rate for women with breast cancer has remained virtually unchanged since 1930. Despite a new understanding of tumor biology, much remains unknown about this disease. We do not know what causes breast cancer or how to cure it. And even less is known about how to prevent the disease from developing. Despite advances in the primary treatment of breast cancer, there remains a lack of research even in the surgical approach to breast cancer. And although there are known risk factors associated with breast cancer, over 70 percent of the women who develop the disease have no identifiable risk factors at the time they are diagnosed. With early detection through mammography, we could save the lives of 30 percent of the women who develop breast cancer. But without further research efforts, 70 percent of American women will remain at risk of developing this life-threatening disease.

The Committee believes that breast cancer research must be a top priority for the National Cancer Institute. Of the $40,000,000 the Committee has provided for research on cancers affecting women, the Committee directs that not less than $30,000,000 be available for breast cancer research. Of this total, $20,000,000 is to be available for basic breast cancer research to understand the cause and find a cure for breast cancer, and $10,000,000 is to be used to establish up to six specialized breast cancer research centers. The Committee urges that the centers be established through the P-50 grant mechanism that links laboratory studies with clinical research to rapidly translate basic scientific discoveries in breast cancer into clinical medicine. The grantee institution receiving the award must make a major commitment to support a comprehensive, interdisciplinary approach to breast cancer research that will integrate basic research, etiology, diagnosis, prevention, clinical applications, training, and quality-of-life issues. The Committee also urges NCI to ensure that the centers encourage cutting edge and innovative research; provide training for young researchers; attract qualified scientists who previously have not been given the opportunity to concentrate their talents on breast cancer research; and expedite the translation of research advances from the laboratory to the patient.

The Committee urges the establishment of up to six specialized programs of research excellence [SPORE] through the P50 grant mechanism that links laboratory studies with clinical research to rapidly translate basic scientific discoveries in breast cancer into clinical medicine. The grantee institution receiving the award must make a major commitment to support pilot interdisciplinary collaborative projects in addition to career development.

By its participation in the trans-NIH healthy women's study, the NCI will explore whether reducing fat intake lowers the risk of developing breast, colorectal, and other cancers in addition to cardiovascular disease. The NCI will begin a 3-year feasibility study to determine effective ways to promote dietary change among minority and less educated women by restricting their fat intake. The tumor suppressive effects of tamoxifen will be assessed in a randomized clinical trial that will enroll women at high risk for developing breast cancer. NCI cooperates with the Health Care Financing Administration, the Health Resources and Services Administration, and the Agency for Health Care Policy and Research in promoting quality control in breast cancer screening using mammography. Although not the lead Government agency for assuring quality control, the NCI supports the education of health care providers involved in breast cancer screening and has established programs of research, education, and technology that promote quality control with respect to mammography.

The Committee is concerned with the uncertainty surrounding the potential adverse side effects associated with the use of silicone breast implants. Despite the estimated millions of women who have received implants, sufficient scientific information does not exist to allay the concerns which have been raised. The Committee encourages the Institute to develop a strategy for conducting longitudinal studies on women on the various types of silicone breast implants, with particular attention to those used for breast reconstruction after mastectomy or injury.

Cervical cancer

The Committee directs that not less than $31,000,000 be available for cervical cancer, at least $5,000,000 more than requested. The Committee further urges that this amount be increased with funds provided in the Office of the Director for Womens Health Issues. Outreach efforts to promote cervical cancer screening, particularly among minorities, the elderly, and other groups of underserved women continue to be emphasized. The NCI also supports tumor virology studies of human papilloma viruses that may ultimately lead to the development of a vaccine against cervical cancer.

Ovarian cancer

The Committee directs that not less than $17,500,000 be available for ovarian cancer research, at least $5,000,000 more than requested. Again additional awards should be made available as appropriate for funds within the Office of the Director. The NCI and the National Institute on Aging will jointly sponsor a conference on "Perspectives on Ovarian Cancer in Older Women: Current Knowledge and Recommendations for Research" to address ovarian cancer in women over age 65. The NCI will also initiate a large-scale trial in which screening by pelvic examination, transvaginal ultrasound, and the antibody CA 125 will be evaluated for reducing mortality from ovarian cancer in women aged 60 to 74. Epidemiologic studies in which obesity, endocrine, and fat metabolism are assessed as factors in the development of ovarian, breast, and uterine cancers in postmenopausal women are also supported.

Synthetic estrogen DES

An estimated 10 million Americans were exposed to the synthetic estrogen DES (diethylstilbestrol). DES was prescribed to 5 million pregnant women during a 30-year period from 1941 to 1971. In utero exposure to DES is linked to a wide range of reproductive tract anomalies in DES daughters and DES sons, and clear cell adenocarcinoma in DES daughters. DES mothers show a greater incidence of breast cancer. DES injuries manifest approximately 20 to 30 years after exposure. The long-term consequences of exposure are unknown because the majority of DES-exposed people are still in their thirties and because no inclusive studies of the population are underway. The Committee is concerned that despite scientific cause to investigate, DES research has declined. The Committee intends for longitudinal studies of the DES-exposed to be a priority of the NIH.

Cancer and poverty

The Committee notes that not all cancer patients have equal access to state-of-the-art cancer diagnosis, treatment, and prevention. This is particularly true for indigent cancer patients who may face many barriers to the delivery of health care. Poverty represents a formidable hurdle which can prevent patients from seeking necessary treatment or pursuing prevention activities which can reduce their chances of a favorable outcome. The NCI will continue its outreach efforts to reach disadvantaged populations, to educate them about the importance of prevention, and the need for early diagnosis and timely treatment.

Cancer prevention and control

The Committee directs that continued emphasis be placed on cancer prevention and control research, particularly in the Community Clinical Oncology Program [CCOP's]. The CCOP's play a critical role in the NCI's clinical trial network by bringing together community cancer specialists, primary care physicians, and other health care professionals. These efforts are strengthened by the minority-based CCOP's which provide minority populations with increased access to state-of-the-art therapy through clinical trials and cancer prevention and control research. The Committee is concerned that the CCOP Program be funded at $16,500,000 and funds not be diverted for other purposes, such as the tomoxifer trial.

Training

The Committee notes the need for a highly trained cadre of cancer researchers to ensure the continuing success of the national cancer program. The NCI's Research Career Program and the National Research Service awards will continue to receive high priority. The Science Enrichment Program which provides research opportunities for promising minority high school students will be expanded to encourage these young people to pursue careers in medicine and the biomedical sciences.

Taxol

Taxol, while not a cure for cancer, has nevertheless shown remarkable activity in treating refractory and recurrent ovarian cancer and breast cancer. The drug is in short supply and cannot be easily synthesized using current technology. The NCI has made the procurement and extraction of taxol, along with the development and synthesis of more active analogues, a major priority. Cooperative efforts between the NCI and the Departments of Agriculture and the Interior to procure and extract the drug are ongoing. The NCI has also initiated a cooperative research and development agreement with Bristol-Myers-Squibb to speed its development.

Prostate cancer

The Committee has included an additional $3,000,000 for prostate research. However, because of an interest in a broadly based effort the funds are included in the NIDDK. The NCI and the NIDDK are directed to work cooperatively on a joint program of prostate research. Because incidence rates for prostate cancer are expected to increase, particularly among black American men, the NCI will initiate a trial in which the effectiveness of screening by digital rectal exam and serum prostate-specific antigen [PSA] to reduce mortality from prostate cancer will be assessed. The trial will also include women and investigate lung, colorectal, and ovarian cancer. Similar to breast cancer research, a SPORE will be established to speed the rapid translation of basic research findings into clinical practice. Other clinical trials are evaluating new diagnostic imaging techniques or proton beam therapy in the treatment of prostate cancer.

Gene therapy

The Committee urges NCI scientists to continue to expand gene therapy research. The NCI's collaboration with the National Heart, Lung, and Blood Institute in which children with a rare inherited immune disorder are receiving genetically altered white blood cells to supply the missing enzyme ADA which they are unable to synthesize is ongoing. Preliminary results suggest improved immune function in these children. Other studies involve treating melanoma patients with their own tumor infiltrating lymphocytes armed with the gene for tumor necrosis factor. These studies pave the way for future research efforts in which additional cancer fighting substances can be inserted into the patient's own blood cells for therapeutic effect.

Cancer vaccines

The Committee notes the new prospects for cancer vaccines and urges the NCI to explore and develop innovative approaches for such vaccines. Innovative vaccines could be used for primary and secondary prevention of cancers. The Institute is encouraged to use the full breadth of molecular biology, immunology, tumor biology, and its clinical trials apparatus to bring about testable vaccines as rapidly as possibly. Further, the Institute is urged to facilitate the general transfer of knowledge from the laboratory to the bedside and to maintain flexibility in the funding instruments used for this purpose. The Committee continues to have great interest in this area of research and directs the NCI to use funds from the increase provided to strengthen its efforts in this area.

NCI continues to emphasize cancer and AIDS vaccine development. Studies include identifying and cloning the gene for melanoma antigen to develop a vaccine against this cancer. Similar work is also underway in breast cancer. If successful, these efforts would represent a major milestone in vaccine development. Increased emphasis will be placed on identifying other viral antigens that elicit protective immunity as well as boosting the antigenicity of tumor cells and developing animal models to test the safety and effectiveness of new vaccines. The goal is to produce classical, preventive vaccines as well as immunotherapeutic vaccines to stimulate immunity and benefit populations at special risk of cancer, either from genetic predisposition, environmental factors, or prior malignancy.

Retrovirus research

The Committee notes that retroviral infections in large domestic animals are excellent models for retroviral-induced diseases such as leukemia lymphosarcoma and AIDS in humans.

The Committee believes that a retrovirus research center would well advance science and notes the expertise of Iowa State University in this field. The Committee directs that up to $1,000,000 be made available for such a center.

International collaboration

Cancer prevention is becoming increasingly important in our ability to effectively address the scope of cancer both here and abroad. The research foundation for cancer prevention is drawn from all aspects of cancer research, and particularly basic research, epidemiology, and cancer prevention and control. Cancer prevention and control programs should serve as the bridge between knowledge derived from basic and clinical research programs and its application to clinical and public health settings.

The Committee has heard testimony regarding the application of prevention research on an international basis, particularly as it relates to the opening of research opportunities in Eastern European countries and the development of a coordinated biomedical research plan as EC92 approaches. To maximize our current international efforts and capitalize on new opportunities, the Committee urges the Institute to more aggressively pursue international collaboration in cancer prevention, with special emphasis on training and information dissemination. The Committee expects, within 6 months, to receive a plan for such programs reflecting the priorities outlined above.

Cancer in native Americans

The proceedings of the first National Conference on Cancer in Native Americans, held October 1989, indicate that American Indians experience excessive cancer incidence for stomach, cervix uteri, primary liver, and gallbladder. Data supplied by the National Center for Health Statistics also indicates that mortality rates are excessively high in cancers specific to cervix uteri, stomach, and gallbladder in native Americans. Equally disturbing is the data on survival rates which indicates that native American cancer patients are dying more quickly from colon/rectum, breast, cervix, and prostate cancers than the general population. The bottom line is that native Americans have little or no access to early cancer detection or screening and once a positive diagnosis is discerned, there is no state-of-the-art treatment available to address this deadly disease.

It must be noted that population-based comprehensive cancer registries on native Americans is limited only to the States of Arizona and New Mexico. These two States represent about 19 percent of the American Indian population and may not reflect accurate prevalence data for the entire native American population.

Based on these findings, the Committee is pleased by the initial efforts of the National Cancer Institute to address the cancer control needs of native Americans in organizing such an event. However, the Committee understands that none of the funding targeted under the $9,000,000 initiative for native Americans has been awarded to address cancer prevention and control activities specific to American Indians, Alaska Natives, native Hawaiians, and American Samoans. This may be directly related to the absence of quality research proposals. Therefore, the Committee urges the NCI to organize four research training events which emphasize development of technical skills, training in research methodology and evaluation, and proposal development in fiscal year 1992.

The Committee also recommends increased focus on the unique risk factors leading to cervical cancer in native American women and on improvement to access to cancer screening, early detection, and prevention efforts. It is understood that patient surveys on cancer are limited and lack cultural sensitivity with respect to the needs of native American women. Further, the Committee remains concerned that culturally sensitive and appropriate prevention information on cancer is nonexistent. The Committee directs the NCI to review this issue and to provide the Congress with a report on the approaches utilized to address the needs of native American populations.

The Committee continues to be concerned about the exceedingly high incidence of cancer among native Hawaiian peoples. Notwithstanding Committee language over the years regarding the pressing need for the National Cancer Institute to address the unique problems of these native American peoples, the Committee understands that consideration is currently being given to merging the Hawaii Cancer Information Service with that of northern California. Such a decision would result in a significant decrease in services to native Hawaiians and should not proceed. Further, the Committee feels that NCI should continue to increase its efforts to significantly enhance the Hawaii Cancer Center's programmatic efforts. The Committee further, and once again, requests NCI to provide a detailed report on its efforts to develop a comprehensive and systematic plan for addressing the exceeding high incidence and mortality due to cancer among these native American peoples. There remains an unacceptably high incidence of cancer among the native Hawaiian population, and although the Committee is pleased that NCI has begun to address this pressing problem, it feels that greater financial resources should be provided, especially in support of projects targeted toward native Hawaiian women. The Committee accordingly urges NCI to establish a cooperative endeavor with the NCNR during this fiscal year.

The Committee also urges NCI to expand its efforts to develop an appropriate response to the needs of American Samoans. Access to timely treatment intervention is especially important for this native American population. Last year the Committee asked for the development of a 5-year plan and is not aware of one being completed to date. The Committee is very concerned that according to recent studies on native American women and cancer, Indian women are less likely to receive adequate screening and treatment for breast, cervical, and ovarian cancers. Findings from the New Mexico Tumor Registry show that Indian women are diagnosed at a more advanced stage of cancer and their survival rate is much lower when compared to non-Indians. Moreover, there exists tremendous confusion at the local provider level about the use of mamography and pap smears. These critical preventive tests are being denied women because of budgetary considerations, delaying diagnosis and treatment.

The Committee urges that this effort be done in cooperation with CDC to establish an Indian women's cancer initiative to encourage more research related to cancer and Indian women with regard to epidemiology, effective detection and prevention programs, culturally sensitive education and outreach and improved treatment services for Indian women with cancer.

Behavioral research

NCI-supported research reveals that roughly 80 percent of cancers are related to lifestyle and environmental factors, making most cancers, at least in principle, preventable. Tobacco use, for example, accounts for an estimated 30 percent of all cancer deaths; dietary factors are implicated in about 35 percent of all cancer cases. Research on health and behavior is a critical component in the war on cancer. NCI is encouraged to expand its portfolio of health and behavior research in the areas of smoking cessation, especially of women and minorities, the impact of dietary fat modification on breast and colorectal cancers, interventions on moderating exposure to ultraviolet radiation, and screening and detection of breast and cervical cancers.

Last year the Committee requested the NCI to assess the degree to which counseling and psychosocial services are being provided to patients and their families in cancer centers. Psychosocial counseling is short-term, time-limited therapy that addresses not only the emotional and adjustment issues of coping with long-term illness, but also issues such as the need to comply with medical treatment plans. The Committee was pleased that the report reflected NCI's growing awareness that alleviating and coping with the fears and anxieties of cancer patients and their families can have tremendous benefits to improving the quality of life of everyone associated with cancer. Further, the Committee is pleased that recent scientific advances have made it possible to measure the psychological, biological, and oncological variables in patients with cancer with greater precision. Accordingly, the Committee strongly urges NCI to further explore the impact on survival and quality of life of cancer patients from psychosocial counseling services and further, to give greater priority to counseling services as an integral aspect of medical care being offered. Within available funds, the Committee requests a study to identify payment mechanisms, such as Medicare and Medicaid, which should be utilized to provide psychosocial services in cancer centers.

Pediatric AIDS

The Committee is pleased with progress made in basic research focused on the issue of pediatric AIDS and has provided an additional $4,000,000 over the requested level to expand the research effort in this area.

Neurofibromatosis [NF]

The Committee believes that important opportunities exist for additional NF research and has included an additional $3,000,000 in the NINDS budget for this purpose. The NCI and NINDS are urged to cooperate in the development of an expanded research program for NF.

The Committee encourages clinical studies of management of cancer treatments and symptoms in older population groups, such as management of pain in collaboration with the NCNR.

The Committee urges NCI to work in collaboration with NIAMSD to address the relationship between cancer and various bone diseases, such as Paget's disease.

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Appropriations, 1991	$1,126,942,000
Budget estimate, 1992	1,209,924,000
House allowance	1,202,398,000
Committee recommendation	1,190,396,000

The Committee recommends an appropriation of $1,190,396,000 for the National Heart, Lung, and Blood Institute [NHLBI]. This is $19,528,000 less than the administration request, $63,454,000 more than the 1991 appropriation of $1,126,942,000, and $12,002,000 less than the House allowance.

The NHLBI conducts and supports a national research program on diseases of the heart, blood vessels, lung, and blood and on the uses of blood and the management of blood resources. In addition, the Institute supports research training and continued career development for both new and established investigators in areas of science related to its mission.

The Committee is concerned that the National Heart, Lung, and Blood Institute has failed to support innovative cardiovascular research which will improve vascular surgical techniques by developing a greater understanding of how blood vessel prosthetics (grafts) behave in the body. The Committee requests a report within 90 days of passage of this bill detailing spending plans, with specific information on how seed funds will be used to increase research in this vital area.

Heart, lung, and blood disease trends

The Committee notes that the death rate for coronary heart disease [CHD] continues to decline significantly for both sexes, blacks, and whites, a decrease that totals nearly 50 percent over the past 25 years. However, CHD continues to be the leading cause of death in America, and cardiovascular, lung, and blood diseases together cause 53 percent of all deaths.

Minority health

The Committee is also interested in NHLBI's research on hypertension in black Americans and understands that a number of potential causal factors, including physiological, psychological, and environmental factors, are being studied. NHLBI is encouraged to maintain its commitment to this type of research to increase our understanding of hypertension in minority populations.

The development of cardiovascular diseases is dependent upon multiple factors, which seem to vary in importance among different population groups. For example, an early marker of arteriosclerosis—streaks of fat in the arterial wall—has been found much more commonly in accidental death victims who are black, than in whites of comparable age. Another example is research on what may contribute to the greater prevalence and seriousness of high blood pressure among blacks. One recent finding is that nocturnal blood pressure decreases less in blacks than in whites.

Women's health

The Committee is pleased that in all but one of the 20 large-scale clinical trials initiated by NHLBI within the past 4 years, women have been significant participants. New research programs of particular importance to women's health include the Cholesterol Reduction in Seniors Program, a trial in elderly persons of new drug therapy for high cholesterol. This study, which includes substantial numbers of women, will address the issue of coronary heart disease prevention in this high-risk age group. Other studies focus exclusively on women's health issues. The postmenopausal estrogen/progestin interventions, initiated in 1987, is measuring the effects of various hormone replacement regimens on such risk indicators as blood lipids, clotting factors, and bone density. The next step is a clinical trial to assess the effectiveness of hormone replacement therapy in preventing cardiovascular disease, which is planned to begin in fiscal year 1992. In addition, the NHLBI will collaborate with the National Cancer Institute in a trial of tamoxifen—an agent now used in the management of breast cancer, which also appears to lower cholesterol—to assess its value in preventing coronary heart disease and breast cancer in high-risk women.

Bone marrow transplantation

The Committee is pleased that the National Marrow Donor Program [NMDP] supported by NHLBI is making bone marrow transplantation a reality for some patients with refractory aplastic anemia, certain leukemias, and a number of genetic diseases. Within the past year, the NMDP has increased its number of potential donors to over 300,000 and the number of potential minority donors has expanded more than fourfold. Continued expansion of the registry is needed to improve the chances of a favorable match for potential recipients, particularly minority recipients. As a result, the National Blood Resource Education Program is implementing new recruitment strategies designed to reach minority groups. More than 300 bone marrow transplantations came from registry donors in the past year—an increase of more than 50 percent over the prior year—and about 425 transplants are expected in 1991.

Gene transfer and gene therapy

The Committee has provided funding for the emerging area of gene therapy which uses techniques of molecular biology to analyze human DNA, to identify, isolate, and purify specific human genes and to insert genes into the DNA of human cells. Gene therapy offers potential benefit to a variety of genetic diseases, including cystic fibrosis [CF], Cooley's anemia, sickle cell disease, and hemophilia. Many concepts and techniques of gene therapy are closely related to bone marrow transplantation, therefore, the NHLBI is establishing a unique intramural research facility that integrates these programs.

A significant step along these lines took place within the past year in which intramural scientists of the NHLBI and the National Cancer Institute performed the first gene therapy in a child with adenosine deaminase [ADA] deficiency. This condition is characterized by severe lack of immune function, susceptibility to infection, and early death. A normal ADA gene was inserted into the patient's own lymphocytes, grown in tissue culture, and then returned into the patient. The patient has done well as demonstrated by her ability to fight off ordinary illness.

Cystic fibrosis [CF]

The Committee notes that as a result of the exemplary public-private partnership of cystic fibrosis [CF] research, scientists have achieved the greatest breakthrough ever made in the history of cystic fibrosis, the discovery of the CF gene and its protein product. The gene discovery symbolizes the success of CF research centers and has opened new avenues for understanding the CF defect and developing treatments that can help the 30,000 children and young adults who have this fatal disease. Because the CF research centers will be instrumental in carrying out this promise, the Committee urges NHLBI and NIDDK to protect the nine centers receiving NIH support from downward negotiations or other reductions in funding. Amounts have been provided to maintain the integrity of the CF centers program, as well as providing funds for initiatives within the NIDDK and NHLBI to maintain the scientific momentum as new opportunities emerge. An increased effort in CF research will enable the Nation to move rapidly toward eliminating the $500,000,000 annual health care costs related to CF. The Institute is to be commended for its efforts in fully funding the CF centers program in fiscal 1991 and in funding additional research grants in that high-priority area.

Prevention of heart disease

A broad program of fundamental and clinical research on the mechanisms and prevention of disease continues. These studies form the basis for the NHLBI National Cholesterol Education Program's recent expert panel reports on population-based strategies for control of blood cholesterol levels in children and adults, and workshops on cholesterol levels in special populations such as elderly, women, and minorities. In addition, the National High Blood Pressure Education Program has sought to prevent disease through its focus on high-risk populations; for example, through the recently implemented strike out stroke initiative. Another approach is to combine the activities of the national education programs into a special intervention strategy such as the NHLBI workplace initiative.

Heart attack remains the No. 1 killer in the United States, striking 1.5 million Americans each year and killing over 500,000—60 percent of whom never reach a hospital. Recent scientific advances, especially the development of thrombolytic therapies (clot dissolving treatment), have been effective in reducing deaths from heart attack. However, thrombolytic therapies must be administered as soon as possible after a heart attack begins, but studies show that one-half of all heart attack victims wait more than 2 hours before getting help. To make more effective use of this technology the NHLBI has started to implement the National Heart Attack Alert Program. The Committee supports the NHLBI's efforts to educate health care professionals and patients about warnings of heart attack and importance of prompt identification and treatment. The Committee has included a $500,000 increase over the budget request to support growth of this program.

Asthma

The Committee commends that National Asthma Education Program on its expert panel report on the diagnosis and management of asthma. This report represents the first time the medical community has reached consensus on the diagnosis and treatment of asthma. The Committee has included funds to ensure the usefulness of this new information in the school environment. Specifically, the Committee expects that funds will be used to assess the current barriers to the management of asthma by children in a school setting, on a State-by-State basis. The Committee further expects the study to be a cooperative effort of the education and health communities. The Committee expects that efforts will be made to develop and evaluate relevant educational materials and that asthma education will be included in ongoing teacher training conferences. Attention should also be given to providing increased research for better understanding of the cause of asthma and developing new approaches for treatment and management.

Asthma is a disease of growing importance, particularly among inner-city residents and minority groups. The NHLBI has a broad asthma program that ranges from basic and clinical research to public education. NHLBI-supported basic research on the inflammatory mechanisms underlying asthma has shown that a class of chemical substances—the leukotrienes—triggers asthma attacks by causing the lung airways to tighten. Newly developed inhibitors of the body's production of leukotrienes are being tested as possible therapy. Established forms of treating asthma and ways of preventing acute attack are being disseminated through the National Asthma Education Program. Particular attention is directed at communities with high prevalence, such as public schools, especially inner-city schools, an effort which is being done in collaboration with the Department of Education. In addition, a research program to develop asthma self-management strategies is being initiated that responds to the specific needs in blacks and Hispanics.

Research centers

The Committee notes that the special centers of research [SCOR's] provide the close interaction between basic scientists and clinical investigators so important for the prompt translation of fundamental research to the clinical setting. SCOR's on atherosclerosis, chronic obstructive pulmonary disease, pediatric pulmonary disease, pulmonary vascular disease, and occupational and immunologic pulmonary disease will be recompeted in fiscal year 1992. Other ongoing SCOR programs address such important topics as: cystic fibrosis, sleep disorders, adult respiratory failure, thrombosis, transfusion medicine, heart failure/coronary heart disease, and hypertension. Service programs, as well as research, are included in the ongoing comprehensive sickle cell centers.

The Committee believes that new centers in cardiac death and congestive heart failure would be important additions to the research program of the Institute. The Committee urges that priority be given to establishing such new centers and allocating additional funds to the existing centers in an effort to meet approved funding levels.

High blood pressure clinical trial

One in four Americans suffers from high blood pressure (hypertension), the most prevalent cardiovascular disease, a major risk factor for heart attack and the leading contributor to stroke. The Committee supports the Institute's planned clinical trial to assess the efficacy of newer classes of antihypertensive drugs in reducing heart attack in men and women aged 45 to 75. This clinical trial will evaluate new treatments for hypertensives, with the hope of reducing incidence of heart attack and stroke and decreasing health care costs. A $1,000,000 increase over the budget request has been included for the first year costs of this coronary heart disease prevention in high-risk hypertensives clinical trial.

Vascular biology and medicine

Heart and vascular diseases are the leading cause of death and sickness in the United States, responsible for about one-half of all deaths and for significant economic costs. Research that integrates blood vessel biology and treatment of blood vessel diseases will improve clinical detection, treatment, and prevention of vascular diseases. The Committee supports the NHLBI's planned program projects in vascular biology and medicine which provide common ground for research on cardiovascular, lung, and blood-related diseases.

Cooley's anemia

The Committee is pleased with the extent to which the NHLBI has undertaken considerable work regarding the development of oral chelators to deal with iron overload in patients with Cooley's anemia who require frequent blood transfusions to replace the current, difficult drug regimen. The Committee urges NHLBI to move forward with this program, including the development of a protocol for clinical trials, at the time warranted.

The Committee is very pleased with the remarkable progress being made in bone marrow transplantation and gene therapy by the Institute and is hopeful that it will have a major effect on the treatment and care of Cooley's anemia and similar anemias.

Health and behavior

The Committee is well aware that diseases in which unhealthy behaviors play a significant role contribute the major share of the burden of illness in our society. Smoking, diet, and other so-called lifestyle behaviors have been directly linked to heart and lung disease. Given the prevalence of these problems, the Committee is extremely eager to see the NHLBI strengthen its health and behavior research portfolio.

Cigarette smoking, for example, remains the chief preventable cause of cardiovascular and respiratory diseases among all segments of American society. In spite of the dramatic decreases in the prevalence of smoking among adults in the United States over the past 24 years (40 percent in 1965, 29 percent in 1989), comparable decreases in smoking prevalence have not occurred in minority groups. The Committee agrees with the emphasis Department of Health and Human Services Secretary Louis Sullivan has placed on the development of interventions designed for minorities to help increase the numbers who quit smoking successfully. The Committee remains interested in NHLBI's Smoking Cessation Strategies for Minorities Program, which is designed to stimulate the development and assessment of smoking cessation and relapse prevention programs for use in minority populations, and encourages the placement of additional resources in this important research program.

The Committee is aware that the NHLBI developed a 5-year research plan on blood diseases and resources in 1983. Most of the then identifiable research initiatives have been undertaken or satisfactorily resolved, but the environment for transfusion medicine has radically changed. For example, the 1983 report made no mention of acquired immunodeficiency syndrome [AIDS] and the bone marrow transplantation activities and molecular genetics of the time were not as much a concern to the transfusion research community as they are today. AIDS and the capacity of blood to transmit disease has demonstrated the importance of the discipline of transfusion medicine. To fulfill the public demand for a safe blood supply, used wisely and prudently in the care of the American people, the Committee supports a greater attention to transfusion medicine research and education.

NATIONAL INSTITUTE OF DENTAL RESEARCH

Appropriations, 1991	$148,918,000
Budget estimate, 1992	160,939,000
House allowance	161,235,000
Committee recommendation	158,266,000

The Committee recommends an appropriation of $158,266,000 for the National Institute of Dental Research [NIDR]. This is $2,673,000 less than the administration request, $9,348,000 more than the 1991 appropriation of $148,918,000, and $2,969,000 less than the House allowance.

The NIDR conducts and supports research and research training on conditions that affect the mouth, the face, and the jaws, as well as investigations of normal growth, development, and aging. Disorders studied include dental caries and periodontal diseases, craniofacial defects, oral soft tissue diseases, acute and chronic pain, and systemic diseases that affect the oral tissues such as AIDS, arthritis, diabetes, and Sjogren's syndrome.

Oral cancers

The Committee is pleased with the Institutes recently announced new initiative in oral cancers; in this expanded program, researchers have already developed new animal models for human cancers, and are now investigating risk factors such as the use of alcohol and tobacco and are testing new approaches to treatment. The new initiative stems from the fact that 30,000 Americans are diagnosed each year with oral cancers and, each year, 10,000 people die from oral cancer. In addition to its efforts to reduce the incidence and mortality associated with these cancers, the Institute will attempt to improve the quality of life of those already afflicted who face disfigurement, destruction of the salivary glands, and serious problems in speaking, chewing, and swallowing.

Oral health in adult and high-risk populations

The Committee urges a continued research expansion focused on oral health of older Americans. The NIDR Research and Action Program for improving the oral health of older Americans and other adults at high risk was developed in response to survey data showing that mature and older Americans have the worst oral health and the most extensive loss of teeth of any age group. These adults are in the age groups who grew up in the 1920's and 1930's without benefit of the oral disease prevention programs common today; they are also more likely to have general health problems and to be taking medications that further compromise oral health. To address these issues, the NIDR plans to support several clinical and demonstration research projects among adults; fund two new clinical core research centers in fiscal year 1991; and provide support for several new research project grants that will focus on the reasons for tooth loss and the control of periodontal diseases in native Americans at high risk.

Birth defects

The Committee urges the Institute to increase its emphasis on research into the causes, prevention, and treatment of birth defects affecting the orofacial area. For example, investigators are searching for the genes responsible for some forms of cleft lip and cleft palate, the most common orofacial birth defect, and are mapping genes associated with the bony defects seen in osteogenesis imperfecta and other hereditary diseases. A clinical trial is testing the use of dental implants in youngsters who have genetically missing or seriously malformed teeth; if successful, the implants will preclude the necessity for dentures that are uncomfortable and require frequent replacement.

Mercury amalgams and alternative materials

The Committee notes that while mercury amalgams have been in common use for over 150 years, recent studies have suggested that even the minuscule amounts of mercury vapor released from dental fillings may be toxic. Although the NIDR and other professional groups agree that mercury amalgams are not harmful to the vast majority of people, the Institute will continue to investigate the possibility of adverse effects of amalgam materials, will hold a technology assessment workshop to examine all dental restorative materials, and will continue to pursue the development of superior substitutes.

The Committee remains supportive of interdisciplinary research and especially projects targeted at various psychosocial problems, such as compliance and avoidance of dental visits. As reported last year, the Committee would be especially supportive of interdisciplinary research projects, and especially those involving psychology-based researchers. Having addressed this issue for several years, the Committee would appreciate a report from the Institute on its interdisciplinary portfolio with an indication of progress made, lessons learned, and applicability to the practicing dentist.

Paget's disease

The Committee urges NIDR to develop a research plan targeting those effected with Paget's disease, a serious bone disorder. This should involve research conducted on the NIH campus at their laboratory.

Additional priorities

The Committee urges that priority be given to the several following areas with available funds:

First, NIDR should begin the process of responding to the wide range of important research questions in the area of fluoride raised in a recent Public Health Service review of fluoride. While the report concluded that there was no link between fluoride and cancer it indicated that more research needs to be done on the widespread availability of fluoride in various consumer products and the food chain. The Committee understands that the NIDR is interested in assessing the total intake of fluoride in the 1990's, as well as efforts to define the way fluoride works to prevent or control the tooth decay process.

Second, NIDR should take steps to further implement the Research and Action Program for Adults through the establishment of additional clinical core centers for oral health research. The centers are expected to develop research opportunities utilizing health care activities in rural areas, senior centers, nursing home settings, or other settings where individuals at high risk of oral disease can be reached for participation in clinical research projects.

Third, NIDR should move toward the establishment of regional centers for minority oral health. The Committee is aware of the special needs of minority populations, and notes that serious disparities extend to both the dental utilization and the oral health of those populations. The proportions of black and Hispanic youth with untreated tooth decay were found to be approximately 65 percent higher than the total population. These model centers will be charged with developing targeted disease prevention and health promotion programs for minorities. When fully operational, these model centers will support a major oral health research nucleus on a regional basis.

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

Appropriations, 1991	$615,272,000
Budget estimate, 1992	658,557,000
House allowance	667,820,000
Committee recommendation	652,861,000

The Committee recommends an appropriation of $652,861,000 for the National Institute of Diabetes and Digestive and Kidney Diseases [NIDDK]. This is $5,696,000 less than the administration request, $37,589,000 more than the 1991 appropriation of $615,272,000, and $14,959,000 less than the House allowance.

The NIDDK supports and conducts research and research training related to many serious and costly diseases affecting the health of Americans, including: diabetes, endocrine, and metabolic diseases; digestive diseases and nutritional disorders; and kidney, urologic, and blood diseases. Shared interests in the biochemical and molecular factors that underlie disease unite the NIDDK's research programs.

Diabetes

Diabetes affects approximately 14 million Americans at an estimated annual cost of over $25,000,000,000. Insulin-dependent or type I diabetes generally occurs in childhood or young adulthood and is marked by destruction of the insulin-producing cells of the pancreas. In noninsulin dependent or type II diabetes, insulin is produced in normal or excess quantities, but the body cannot use it properly. Both forms of the disease have serious complications, including end stage kidney disease, heart attacks, amputations, blindness, and nerve damage.

The Committee is greatly impressed with the scientific advances and promising opportunities now emerging from research on genetic factors in both forms of diabetes. The Committee has heard testimony that NIDDK-supported genetic defect appears to be related to the development of insulin-dependent diabetes. At the same time, studies of noninsulin dependent diabetes have suggested that genes which regulate insulin recognition, glucose transport, and key metabolic enzyme are implicated in this form of the disease.

A particularly exciting area of diabetes research which is receiving increased attention within the scientific community involves a search for the genes responsible for the onset of diabetes and its complications. Finding the diabetes genes could have a dramatic effect on research into the cause, cure, and prevention of diabetes, just as the recent cloning and sequencing of the gene responsible for cystic fibrosis represents a major breakthrough in the war on that disease. While the task with regard to diabetes is admittedly more complex, there is significant cause for hope.

To enable the NIDDK to exploit fully the new research leads in this field, and to capitalize on emerging molecular biology techniques and the newly emerging genetic resources, the Committee is providing $2,000,000 in additional funds in fiscal year 1992 to intensify the search for the diabetes genes. The Committee expects the Institute to use these additional funds to pursue the most scientifically meritorious and promising research concepts related to the genetics of diabetes, as identified through the NIH peer review process.

Endocrine research

Hormones play an important role in the causes, symptoms, and treatments of diseases such as osteoporosis, cancer, cardiovascular and psychiatric disorders, and AIDS. In a new clinical study to evaluate the effectiveness of parathyroid hormone as a treatment for osteoporosis, NIDDK-supported investigators will assess whether the hormone can help increase bone mass in women with osteoporosis who are also receiving estrogen-replacement therapy. The Institute is also participating in a clinical trial to evaluate hormone replacement therapy in postmenopausal women, which will include its effect on the development of osteoporosis. Other examples of recent progress in endocrine research include: the identification of growth factors that play a role in bone formation and loss; the cloning of receptors for hormones thought to be involved in neurologic and autoimmune disorders such as Parkinson's disease, schizophrenia, and Grave's disease; and the identification of possible roles of hormones and hormone-like factors in the wasting of AIDS.

Metabolic diseases

When genetic mutations alter the body's production of enzymes, its chemical balance is upset and disease results. With the goal of correcting such metabolic diseases, scientists are studying the complex processes by which genes are turned on and off, produce proteins, and control cell activity. Thus, the identification of the cystic fibrosis [CF] gene in 1989 was a major step toward improved therapy for this genetic disease. Investigators have now inserted a normal CF gene into pancreatic cells taken from CF patients and thereby eliminated CF in the laboratory. Researchers are also seeking gene therapy approaches for other metabolic disorders, most of which cause severe physical and mental debilitation as well as premature death. New techniques for gene therapy may have wide application beyond the area of metabolic diseases, in treating common diseases such as atherosclerosis and cancer.

Cystic Fibrosis

Cystic fibrosis continues to be the most common fatal, inherited disease and is the No. 1 killer of children. An estimated 1 in 20 Americans carry the gene for cystic fibrosis and it is the most common inherited disorder among whites.

Recent advances, however, offer great hope to 30,000 Americans with cystic fibrosis. Support from the NIDDK and other nonprofit groups has helped research in CF proliferate in three key areas—gene, protein, and drug therapies. As a result, the Committee has provided funds to fully continue the CF centers program as well as providing funding for new research grant programs.

The Committee notes that with the innovative public and private partnership in funding, there has been an incredible explosion in CF research due to the innovative development of the CF research center structure. The network was established following a congressionally mandated study in 1978 recommending the organization of multidisciplinary research teams to address the growing intricacy of the CF research. Selecting top quality centers that are committed to studying novel approaches to treatment and training young investigators has made a difference. As the increasingly complex research demands new levels of expertise, the multidisciplinary structure of these centers enables the partnership to combine critical scientific resources to cure this disease. Taking the lead in providing funding and in developing exciting new grant opportunities has demonstrated true leadership by the Institutes in coming so close to conquering this disease once and for all. The Committee is very pleased with the research progress made in this area and looks forward to a full report on this disease and progress at the next Committee hearings.

Digestive diseases

Digestive diseases impact more than one-half of all Americans at some time in their lives and account for approximately $50,000,000,000 annually in economic losses in terms of health care costs, lost wages, and reduced productivity. Among the various disorders the Committee learned more about were Crohn's disease and colitis, also known as inflammatory bowel disease. IBD is considered one of the most debilitating digestive diseases, requiring extensive medical and surgical attention, and frequently leading the victim to ostomy surgery and intravenous parenteral nourishment. The Committee directs that $2,000,000 from available funds be provided to continue to accelerate IBD research efforts and also requests that the Institute carefully review potential clinical trials into drugs that may alleviate the medical complications of IBD sufferers.

Cirrhosis of the liver is the fatal complication caused by many liver diseases including hepatitis, biliary atresia, and substance abuse. Even though the Committee is extremely pleased with progress that has taken place with respect to liver transplants, great promise exists in areas of liver disease prevention. Prevention of liver disease would be less costly, less traumatic, and more effective. The Committee encourages continued focus on liver disease prevention.

Nutrition

The Committee notes that the NIDDK clinical nutrition research units and an obesity research center support multidisciplinary research on nutrition issues and obesity. To assist in developing priorities for new clinical trials in obesity, the Institute is establishing a national task force on the prevention and treatment of obesity. The task force will also help develop scientifically valid position statements on obesity for dissemination to the public and to health professionals. To develop scientific knowledge to improve the research base for nutrition and the dietary guidelines for Americans and to deal with the problem of nutrition disorders and obesity, the Committee is providing an additional $1,000,000 for the establishment of additional clinical nutrition research units within the NIDDK, the lead NIH Institute for fundamental research on nutritional requirements.

Kidney and urologic diseases

Over 13 million Americans suffer from kidney and urologic diseases, which afflict a disproportionate number of minorities and older Americans. The direct costs of these diseases are expected to exceed $50,000,000,000 this year.

Last year, the Committee requested a report on funding needs of this important program. We have reviewed the report that was submitted. While it outlined the excellent research initiatives that the NIDDK is presently supporting, it provided little guidance regarding the research priorities and funding needs that exist in this area. Further, last year, the Committee directed that a portion of the increase provided be used to expand efforts in kidney disease research but is disappointed with the response.

Within the amount provided, the Committee strongly encourages the NIDDK to place a special priority on kidney research, and directs that a report be given to the Committee on the allocation of these funds within 120 days. We emphasize that the funds should be placed across the spectrum of kidney research and training to promote basic and applied research efforts that will serve as the basis for new preventive, diagnostic, and therapeutic strategies in the management of these diseases. Further, the George O'Brien Kidney and Urologic Research Centers have proven to be an extremely effective research mechanism whose focus is research aimed at preventing costly kidney diseases. These centers have not received a funding increase for the past 4 years. Therefore, the Committee directs that a portion of the funds provided for kidney research be directed toward efforts in these centers to address the multiple research opportunities which exist.

The Committee believes that an expanded research effort should be focused on polycystic kidney disease which affects more than 500,000 Americans, which is more than any other genetic disease. Major progress in being made in research on polycystic kidney disease and the Committee is satisfied that additional support of research in this area is timely and useful. The Committee, accordingly, has provided an additional $4,000,000 for polycystic kidney disease research in fiscal year 1992. At least two of the additional O'Brien centers should be focused on the treatment and cure of this disease.

Interstitial cystitis

The Committee has a strong interest in research in interstitial cystitis, a devastating bladder disease which mostly affects women. It is pleased that in fiscal year 1991 the NIDDK issued an RFA for clinical research into interstitial cystitis and began to establish an IC data base. To continue this research initiative, the Committee has provided $1,000,000 in additional funds to the urology program of the NIDDK in fiscal year 1992 to be used specifically for IC and directs that another $1,000,000 be provided from within available funds. These funds should be used to support further research into IC, solicited through a request for applications [RFA] specifically on IC, and toward the expansion of the IC data base.

Prostate research

The Committee is concerned with the large number of men who suffer and die from prostate cancer and other urological diseases. The Committee has included $3,000,000 of additional funds for an expanded prostate cancer and a basic prostate research program. This effort is to be conducted with the NCI and a joint program is to be developed.

Hematology

NIDDK-supported fundamental and clinical hematology research is providing insight into globin gene expression in human development and in inherited hemoglobin disorders such as Cooley's anemia and sickle cell disease. In animal studies testing oral iron-chelating drugs for use by Cooley's anemia patients, one drug that has shown exceptional ability to remove iron from the blood also appears to have low toxicity. Having found that patients with sickle cell disease could improve clinically after treatment with the drug hydroxyurea, researchers are now trying to enhance that improvement by combining hydroxyurea with other drugs.

Paget's disease

The Committee urges NIDDKD to give priority to projects targeted toward Paget's disease.

Cooley's anemia

The Committee is pleased with the extent to which NIDDKD has supported considerable basic research toward the development of an oral chelator to replace currently used drugs, which must be infused subcutaneously, for 8 to 12 hours daily, in the treatment of iron deposit overload in organs caused by frequent blood transfusions to patients with various anemias, especially Cooley's anemia (thalassemia). The Committee has learned that NIDDKD has screened over 300 compounds, 5 of which show considerable promise to become a safe and effective oral chelator. Animal studies are now being undertaken on these drugs, and it is understood that the process is moving forward quickly. The Committee urges the continuation of these tests over the next year and urges the Institute to work with other Federal agencies to clear the utilization of these drugs, if appropriate, in human trials. The use of an oral chelator would mark a major advance in therapy; work should continue within the Institute at a basic level regarding gene transplant therapy, which may well produce a cure in the foreseeable future.

Pediatric nephrologists

The Committee has repeatedly expressed concern about the crisis in the training of pediatric nephrologists as more than 20 States have either one or no pediatric nephrologist. Within available funds, the Committee urges funding for eight training positions to begin to reverse this alarming problem.

Last year, the Committee urged NIDDK to consider the establishment of a small number of centers of excellence to study the kidney and urological diseases which effect thousands of our Nation's children. The Committee is pleased to learn of NIDDK's initiative to establish one pediatric nephrology/urology center and urges NIDDK to expand this number to meet the original goal of two to three such centers.

End stage renal disease

A recent IOM report, "Kidney Failure and the Federal Government," noted that the end stage renal disease program costs in excess of $5,000,000,000 per year. Yet, between 1984 and 1989, the NIDDK made no awards for clinical studies of dialysis therapy. The Committee urges the Institute to support clinical research directed at searching for new, better, less costly, and more efficient ways to deliver this lifesaving care.

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE

Appropriations, 1991	$541,743,000
Budget estimate, 1992	583,355,000
House allowance	583,355,000
Committee recommendation	583,386,000

The Committee recommends an appropriation of $583,386,000 for the National Institute of Neurological Disorders and Stroke [NINDS]. This is $31,000 more than the administration request, $41,643,000 more than the 1991 appropriation of $541,743,000, and $31,000 more than the House allowance.

The NINDS is the focal point at the National Institutes of Health for research and research training to understand the brain and treat and prevent neurological and neuromuscular disorders. Stroke, multiple sclerosis, epilepsy, head and spinal cord injury, Alzheimer's disease, muscular dystrophy, Parkinson's disease, and other neurological and neuromuscular disorders affect, millions of Americans. Studies in neuroimmunology, neurovirology, neuro pathology, and neuroepidemiology enhance understanding of the structure and function of the nervous system and the pathogenesis of brain diseases. Basic research findings translate into clinical trials and studies of disease etiology, the development of rational medical and surgical treatments, preventive strategies, and methods for restitution of function.

Decade of the Brain

The Congress and the President's designation of the 1990's as the Decade of the Brain recognizes that the basic and clinical neurological sciences are rich with scientific means and opportunities to expand our Nation's knowledge, explore advances in technology, and reduce the personal and financial burden of brain-related disorders. The NINDS has set two objectives for the Decade of the Brain: understanding the human brain and improving the quality of life. In 1990, the National Advisory Neurological Disorders and Stroke Council prepared an implementation plan for the Decade of the Brain that clearly identifies the specific areas ripe for further progress in understanding, preventing, and treating disorders of the nervous system.

Alzheimer's disease

The tragedy of Alzheimer's disease is one of growing proportion with potentially devastating public health and economic consequences. According to the National Institute on Aging, an estimated 4 million Americans suffer from this degenerative disease at a cost to the Nation of well over $90,000,000,000 annually. But the tragic impact of Alzheimer's disease extends beyond its victims, to include the families, friends, and loved ones who assume the role of caregiver. Furthermore, the marked growth over the next 50 years of the older population may result in a fivefold increase in dementia patients along with associated health care costs.

While the NIA is the lead agency on Alzheimers disease, the Committee is very favorably aware of the important and fundamental research that NINDS supports on AD. The Committee has provided a $6,250,000 increase for AD research over the Presidents request by the total to $43,250,000 for AD research at NINDS. As in the past, the Committee expects this effort to be closely coordinated with NIA and the several other Institutes with AD research portfolios. The Committee is well aware of the strong research capabilities of the University of Iowa in this field and expects them to compete well for additional funding.

Head and spinal cord injury

Last year, results of an NINDS-supported clinical trial established high-dose methylprednisolone—given within 8 hours—as the first medical treatment that could improve the outcome of an acute spinal cord injury. NINDS is actively pursuing laboratory and clinical studies to further develop this treatment and identify similar strategies for head injury. This year, NINDS will initiate a pilot 3-year program of regional clinical research centers for head and spinal cord injury. These centers will develop improved therapies, promote research on preservation and restitution of function after injury, and provide the environment necessary for the recruitment and training of investigators for research on central nervous system trauma. The Committee directs that strong priority be given to head and spinal cord injury research.

The Committee is pleased that five new head injury centers will be funded in 1991. Funds are included in the 1992 appropriations to continue these centers. The Committee directs that continual strong emphasis be given to these centers and all necessary support be provided to increase their success.

These centers should include the study of injury science, trauma care, and focus on health care delivery services. These centers will involve an integrated basic science department with a focus on cell biology, anatomy, and injury sciences, coupled with a level 1 clinical trauma center program.

Stroke

The Committee notes that during the past year, NINDS supported clinical trials have demonstrated the efficacy of two strategies to prevent stroke. The first trial showed that treatment with aspirin or warfarin for patients with atrial fibrillation greatly reduced the risk of stroke. Most recently, NINDS grantees have found that a surgical procedure, carotid endarterectomy, can prevent stroke in many patients who have severe blockage of the carotid artery and have already shown warning signs of stroke. Identifying and characterizing specific risk factors for stroke continues to be a high priority for NINDS. An ongoing study has related ethnic differences in risk factors to differences in stroke type and outcome; other studies are expected to broaden our understanding of risk factors, with an emphasis on minorities and women. The Committee urges strong priority be given to additional research on stroke.

Chronic brain degeneration

One NINDS research objective is to prevent brain cell degeneration or arrest it in the earliest stages of diseases such as Alzheimer's disease, Parkinson's disease, and amyotrophic lateral sclerosis—Lou Gehrig's disease.

New genetic studies, neurochemical studies, and the development of advanced imaging methodologies are being emphasized to shed more light on the fundamental cause of Alzheimer's disease. Research to understand Alzheimer's disease will be enhanced by additional projects funded in fiscal year 1991 as a result of a request for applications [RFA] issued by NINDS in cooperation with the National Institute on Aging.

Investigators funded by NINDS achieved a major research advance in mapping the genetic focus that causes familial amyotrophic lateral sclerosis. This is the first important step in better understanding the basic molecular mechanisms of this disease.

Multiple sclerosis

The Committee was pleased to learn of the progress in research on multiple sclerosis and that previous medical research efforts are lending more and more hope as new possibilities for early diagnosis and treatment become evident through new and improved research techniques. For instance, NIH-supported scientists have announced findings suggesting that MS may be very active even at its earliest stages when there are few clinical signs of the disease. This finding will have significant impact on the development of new therapies and approaches to treatment. In addition, the Committee was pleased to learn that the study, which was temporarily delayed while funds were shifted to the clinical trial for Gaucher's disease, has been initiated.

In keeping with the promise of medical research and our commitment to the Decade of the Brain, the Committee urges NINDS to direct additional resources to MS from within the funds provided. Specifically, the Committee is interested in additional research on the role of genetic factors in MS, as well as the other areas identified in the implementation plan for the Decade of the Brain.

Neurogenetics

The Committee's funding levels will permit NINDS investigators to continue to refine the optimal dose for enzyme replacement therapy in type 1 Gaucher's disease, the most prevalent inherited metabolic storage disorder. NINDS scientists have developed a protocol to determine the minimum dose of enzyme necessary to yield therapeutic response in type I Gaucher's disease patients, which, in turn, may assist in lowering the cost of this very expensive therapy. Other high-priority initiatives include determining the efficacy of enzyme replacement for type III Gaucher's disease and exploring gene replacement therapy.

In other areas, NINDS investigators continue work to localize the genetic defect in Huntington's disease. Research to determine the physiologic defect and possible therapies has progressed. For instance, preliminary efforts are underway to test the efficacy of the drug idebenone to protect brain cells at risk in Huntington's disease. Dystrophin research has unexpectedly revealed that more than one gene may be producing proteins that mitigate the symptoms of muscular dystrophy. The neurofibromatosis 1 [NF-1] gene has been located on chromosome 17; ongoing research will clarify the gene's normal function and its role in the symptoms of NF-1 and other disorders of cell growth such as cancer. Both genetic linkage studies and studies of biochemistry are probing independently the underlying causes of various types of neuronal ceroid lipofuscinoses, more commonly known as Batten's disease. The NINDS will continue to support research aimed at providing insights into understanding this disease.

Neuroimaging

The Committee supports experiments with positron-emission tomography [PET] which have linked discrete areas of the brain to word-processing tasks and have confirmed the unique role PET has for understanding the higher cognitive functions. Magnetic resonance imaging [MRI] has been established as a critical tool for research on neuro-AIDS and multiple sclerosis.

Biobehavioral research

The Committee recognizes that despite significant advances in biobehavioral research areas such as brain chemistry and behavior, learning and memory, and other aspects of the brain and nervous system, there must be increased support in order to develop ways to relieve the physical, financial, and psychological burdens that encumber numerous Americans with neurological or communicative disorders. It is the Committee's view that higher priority should be given to biobehavioral programs which support research on conditions such as autism, attention deficit disorders, developmental language disorders, dyslexia, sleep disorders, and chronic pain. Further, the Committee regards research on the neurological basis of cognition as an area with much promise for understanding the complex functioning of the brain especially in the areas of learning and memory, and urges NINDS to make this research more of a priority.

Neurofibromatosis

The Committee recognizes that extraordinary progress has been made in the past year in research on Neurofibromatosis [NF], including the discovery and cloning of the NF1 gene and the determination of its gene product. These discoveries have now made possible significant new scientific opportunities for further research into NF, including determination of the role of the NF-1 gene product in producing the many severe problems seen in NF-1, development of a direct gene test for the diagnosis of NF-1, development of an animal model utilizing transgenic animals and further phenotype/genotype correlation in NF. Since NF and cancer both involve tumor-suppressor genes producing a similar gene product, research into finding a treatment and cure for NF, which afflicts 100,000 Americans, holds open exciting new opportunities to finding a treatment and cure for cancer as well. Accordingly, the Committee has provided an additional $2,000,000 in the budget to further research into NF which holds such great promise for millions of Americans. This expanded research effort should be pursued jointly with NCI.

The Committee further recognizes that the National NF Foundation played a critical role in encouraging collaborative efforts among molecular genetic laboratories working of NF and the Committee recognizes the importance of the National NF Foundation's pilot project on gene linkage diagnosis. The Committee believes that National NF Foundation could play an expanded and important role in these matters with appropriate support from the NINDS.

Late effects of polio

Polio has usually been considered a stable, chronic disease. Once a person had recovered from the acute phase, the condition stabilized, or so it was thought. According to a 1987 survey by the National Center for Health Statistics, there are estimated to be 640,000 persons in the United States who contracted paralytic polio and are still alive. As many as one-half of these persons have begun to experience new health problems which seem to be related to polio.

The new health problems are called the late effects of polio. There are many symptoms and their exact relationship to the original disease are not fully understood. But the evidence is unmistakable. Persons who had polio during the 1940's and 1950's are now experiencing new problems such as muscle weakness, muscle atrophy, loss of function, joint and muscle pain, and respiratory problems at a much higher rate than the rest of the population.

The Committee is supportive of the National Institute of Neurological Disorders and Stroke initiating research on the late effects of polio. Specifically, the Institute should initiate requests for applications [RFA's] to investigate the cause and treatment of the late effects of polio. The new National Center for Medical Rehabilitation Research should also initiate RFA's. Possible causes that should be investigated include neuromuscular transmission, neuromuscular overuse, and muscle cell breakdown. Treatments to be investigated should include the use of nonsteroidal drugs and the therapeutic effectiveness of exercise regimens.

Epilepsy

The Committee is encouraged by the NINDS consensus conference report concerning surgical intervention for certain epilepsy patients and urges the pursuit of clinical trials with available funds.

Brain tumors

The Committee is concerned regarding the increased incidence of brain tumors, particularly among those under the age of 45. The Committee urges the establishment of several new brain tumor centers, each with a training component. Further, the Committee has provided $2,000,000 for up to four feasibility grants to develop future capacity in this important area and at least one brain tumor research center. This effort should be closely coordinated with the National Cancer Institute. The Committee feels that these grants would be an important investment in the future as it will help develop additional research capabilities.

Narcolepsy research

During the last several years, the Committee has strongly recommended that the NINDS increase the level of funding for narcolepsy research. Even though the Committee is aware that NINDS has issued a request for applications and sponsored a scientific symposium on narcolepsy research, still virtually the same level of funding exists as in 1986. The Committee recommends that NINDS make every effort to double the annual funding level for narcolepsy research. Consideration should also be given to appointing a person with narcolepsy expertise to the NINDS National Advisory Council.

Gaucher's disease

The Committee was pleased to learn of the Institute's continuing study of enzyme replacement therapy for Gaucher's disease. The Institute has initiated further study in the development of minimum dose requirements for type I Gaucher's disease patients and has developed the human protocol for the study of the therapy for individuals suffering from type III. The Committee has provided additional funds to continue these important investigations which have recently brought hope to thousands of individuals and families affected by this disease.

Batten's disease

The Committee continues to be concerned with the pace of research in Batten's disease. Batten's disease is a crippling, universally fatal brain disease of infants, children, and adults. It is the most common neurogenetic disease in children. The disease entails progressive irreversible, intellectual deterioration, visual loss, seizures, and eventually death. The cost of care constitutes an enormous medical and financial burden to families with afflicted children. The Committee believes that the Institute should actively solicit and encourage quality grant applications for Baten's disease research and that it continue to take the steps necessary to assure that a vigorous research program is initiated and sustained. The Committee has provided up to $2,000,000 within the funds available for Batten's disease research.

Dystonia

The Committee continues to encourage the Institute to expand support of research focused specifically on dystonia. In view of the fact that gene markers have been discovered, but the gene has not yet been identified, expanded research, particularly in the fields of microneurochemistry and molecular genetics, offers great promise.

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

Appropriations, 1991	$907,276,000
Budget estimate, 1992	976,711,000
House allowance	972,830,000
Committee recommendation	959,952,000

The Committee recommends an appropriation of $959,952,000 for the National Institute of Allergy and Infectious Diseases [NIAID]. This is $16,759,000 less than the administration request, $52,676,000 more than the 1991 appropriation of $907,276,000, and $12,878,000 less than the House allowance.

The NIAID conducts, fosters, and supports basic and clinical research and research training programs in the areas of infectious diseases and diseases caused by or associated with disorders of the immune system. The Institute also has the lead role within the NIH to develop new and improved vaccines and to conduct and support research on the acquired immunodeficiency syndrome [AIDS]. The ultimate goal of these research activities is to improve the health and quality of life of people of all ages by finding the causes of, and improved methods for diagnosing, treating, and preventing, immunologic and infectious diseases which affect millions of people annually.

Prevention and behavior

This Committee is pleased to learn of the demonstration and education research activities that the NIAID conducts to promote health and prevent disease in defined populations. For example, the NIAID supports a self-management program for hospitalized, inner-city children with asthma to increase their understanding, control, and reduction of asthma attacks. Another disease area which benefits greatly from educational and behavioral interventions is the area of sexually transmitted diseases [STD's]. To deter the spread of disease and risk of infection, the NIAID supports counseling activities for individuals afflicted with such STD's as genital herpes and pelvic inflammatory disease [PID]. The Committee acknowledges the NIAID for its demonstration and education initiatives to foster health and thwart disease and wholeheartedly supports its necessary and continued efforts in this area.

Vaccine development and prevention

The Committee was pleased to learn of the recent FDA licensure of two new vaccines developed with NIAID-supported research. These vaccines protect infants from haemophilus influenzae type b [Hib], the leading cause of bacterial meningitis and subsequent secondary complications such as mental retardation and permanent hearing loss. Because these new vaccines can be administered to infants between the ages of 2 and 15 months, their risk for developing Hib is now significantly reduced. Jointly funded by the NIAID and the National Institute of Child Health and Human Development, these vaccines will save an estimated $359,000,000 in health care costs for every annual cohort of children who are vaccinated. The Committee is very impressed by these significant cost savings resulting from a modest investment in vaccine development and recognizes the important role that vaccine development plays in the prevention of disease.

The Committee is pleased by the efforts of the NIAID to develop a children's vaccine. Initiated in fiscal year 1991, the goal of this research effort is to develop a multiantigen vaccine that will provide lifelong immunity against the major infectious childhood diseases when administered as a single dose early in childhood. The Committee understands the importance of the underlying research involved in achieving this goal. Further, the Committee recognizes the need for continued support of these research activities which crosscut vaccine development, from basic research such as enhancement of mucosal response, to their applied use such as efficacy tests of candidate vaccines.

The NIAID pioneers the development and testing of many other vaccines—for example, pertussis, cholera, measles, and group B streptococcus—through support of its basic and clinical research programs. The NIAID is also on the forefront of emerging new biotechnologies which have the potential to play a critical role in the enhancement of vaccine development. Because of its significant impact on health care and ultimate cost savings, this Committee urges the NIAID to continue its impressive efforts in the area of vaccine development.

Allergy and asthma

The Committee notes that reports published last fall confirmed that despite advances in treatment, the numbers of children who are suffering and dying from asthma are continuing to increase. A disproportionate number of inner-city minority children are reflected in this trend. Whether due to a floundering health care delivery system, an unknown physiological disease component, or some combination, the NIAID is tasking itself to reduce these statistics. The Committee was pleased to learn that the Institute recently announced eight awards to establish a network of centers to study the problem of asthma in children residing in the inner city. Their program objective is to identify the factors contributing to asthma and to develop interventions against its occurrence. The Committee fully supports the efforts of the NIAID to block this progressive and debilitating disease particularly as it affects the children of this country and further requests that NIAID increase its efforts in investigator-initiated basic research on the biochemistry and immunology tissue inflammation in asthma and other allergic diseases.

Sexually transmitted diseases

The Committee has included funding to continue sexually transmitted diseases [STD's] research. STD's are serious diseases that place a considerable burden on the health care system of this country. They afflict many people, particularly women and infants, and their rate of incidence is increasing. Recent reports indicate that a large percentage of cases of chlamydia, the most common bacterial STD, has been seen among teenagers. These statistics are especially alarming because STD's are associated with pelvic inflammatory disease [PID] which causes infertility, ectopic pregnancies, and chronic pelvic pain. The Committee welcomes the efforts of the NIAID to support STD cooperative research groups—an initiative undertaken in fiscal year 1991, and its plans for a PID clinical trial in fiscal year 1992. Such activities will focus on basic and applied research to develop vaccines and intervention strategies, improved diagnostic tests, and treatments.

Chronic fatigue syndrome

The Committee notes that despite the ever-increasing numbers of people afflicted with chronic fatigue syndrome [CFS] and the various associated symptoms, there remains a remarkable lack of specific physical and laboratory diagnostic tests. To date, diagnosis for CFS is done by means of exclusionary criteria of other diagnoses. Recent preliminary NIAID-supported research findings suggest that CFS may result from an inherent or acquired impairment in the immunological/neurological network and may be triggered or exacerbated by viral infection or reactivation and possibly stress. In recognition of the need to better understand the causes of CFS and to develop preventive strategies, the NIAID established CFS cooperative research groups in fiscal year 1991. The Committee strongly supports the research efforts of the NIAID on CFS and join them in the hope that greater progress can be made in understanding and treating this chronic disease, but is concerned that no study section exists to evaluate chronic fatigue syndrome research proposals. The Committee requests that the Office of the Director consider the merits of establishing a multidisciplinary study section for chronic fatigue syndrome.

The Committee requests an annual report on chronic fatigue syndrome research from NIH to the Congress, as is the case with other diseases. In its activities the NIAID should compile a CFS patient registry and study the establishment of a central clearinghouse for CFS data.

Lyme borreliosis

The Committee urges a continued strong priority be given to Lyme disease, the most common tick-borne illness in the United States. If not identified soon enough, the disease can cause severe and debilitating conditions of the neuromusculoskeletal system. Side effects may include arthritis and abnormal heart and neural conditions. Diagnostic tests currently available lack the specificity to identify the infection in its early stages—before harm is done. Hence, the Committee was pleased to learn of the awards made by the NIAID in fiscal year 1991 to improve diagnostic and screening procedures for individuals infected with this insidious disease.

AIDS

The Committee notes that AIDS is increasingly becoming a disease of heterosexuals, women, children, and minorities. To assist in identifying specific research needs pertaining to women, the NIAID has established a women's health committee within its AIDS clinical trials group. In addition, the Institute has plans to initiate a multicenter study of the natural history of HIV disease in women in fiscal year 1992 to study the nature and rate of HIV progression and the impact of cofactors such as STD's, pregnancy, and drug use.

The Committee is concerned by reports suggesting the AIDS Clinical Trails Group [ACTG], the major component of the NIH's AIDS clinical research effort, has not been sufficiently responsive to NIH priorities regarding enrollment levels, recruitment of women and minorities into trials, and research regarding opportunistic infections.

The Committee believes that the NIH has sufficient authority to assure that federally funded entities perform the AIDS clinical research that the NIH deems to be of highest priority and expects the NIH to exercise this authority during the recompetition of this program in fiscal year 1992. The Committee expects that more specific mechanisms for such authority will be written into the funding arrangement, whether a contract, a grant, or a cooperative agreement. The Committee expects that performance criteria, such as meeting enrollment targets in trials and responsiveness to priorities set by NIH staff, will be among the accountability criteria set for this and all other clinical trials programs.

Community-based primary care physicians participating in the clinical research effort as members of the NIH-funded community programs for clinical research on AIDS [CPCRA] are greatly expanding the NIH's capacity to evaluate new treatments to include trial participants from medically underserved groups and to offer them urgently needed access to promising experimental treatments. The CPCRA is an innovative and cost-effective program that accelerates the pace at which new treatments are evaluated and made accessible to all those who need them, including women and minorities. The CPCRA Program deserves continuing and much increased support. The Committee recommends a significant budget expansion for that program in fiscal year 1992. Additionally, the Committee supports funding for new CPCRA contracts targeted to organizations with significant representation by communities affected by the HIV epidemic.

In the area of pediatric AIDS, the NIAID has plans to expand its pediatric AIDS clinical trials activities by soliciting new grants and making supplemental awards to existing grants and contracts. Also, the NIAID will provide support for ancillary services and outreach activities to stimulate enrollment and retention of children in clinical trials; develop innovative technologies for diagnosis of HIV infections in the newborn prior to 8 weeks of age; determine the factors of perinatal transmission; and establish new pediatric AIDS clinical trial units in underserved areas.

The Committee has been pleased by the great strides the NIAID has made in advancing the treatment of AIDS-related opportunistic infections. For example, NIAID-sponsored studies have shown that the drug fluconazole can replace an effective, but more toxic drug, as maintenance therapy to prevent recurrences of cryptococcal meningitis, a life-threatening infection of the brain and spinal cord. In addition, another drug, foscarnet, has proven to be effective in delaying progression of cytomegalovirus retinitis, a sight-threatening eye infection. There are ongoing and planned studies focused at treatment strategies for all of the major opportunistic infections.

Minority representation

The Committee understands that blacks are underrepresented in the AIDS clinical trials groups. The Committee recognizes the need for a broad representation of minority men, women, and children in the AIDS clinical trials groups. New Jersey has one of the highest per capita rates of HIV infection and pediatric AIDS. The Committee encourages NIAID to create more clinical trials at the University of Medicine and Dentistry of New Jersey [UMDNJ] in the Newark area for research purposes that will benefit the minorities and women nationwide.

The NIAID is working to increase minority representation in the AIDS clinical trials program. This effort is directed both at those infected and at the constituents and health professionals involved in AIDS research. The NIAID provided supplemental funding to existing AIDS clinical trial units to support additional recruitment and maintenance of minority subjects in clinical trials. The NIAID has also made three awards to institutions that primarily serve minority populations to help them build the necessary infrastructure to conduct AIDS clinical trials.

AIDS vaccines

The Committee is pleased to learn of the successful vaccine studies conducted on the simian monkey immunodeficiency virus. These studies show promising indications of protection. There is hope that a candidate vaccine for large-scale testing in uninfected human volunteers will be identified in the very near future. The Committee urges that NIAID accelerate its efforts to test and validate the several promising vaccines that now exist. The Committee is concerned with reports from several sources that NIAID is not moving ahead with these necessary trails even though a number of candidate vaccines have been proven safe for use in humans.

AIDS training

The Committee was very pleased to hear of the NIAID's continued emphasis in its overall training portfolio. Further, the Committee was particularly interested to learn of the NIAID's intention to initiate a request for applications for AIDS training grants in fiscal year 1992. The Committee urges that special consideration be given to those approved applicants who have identified a specific interest in pediatric AIDS and urges that a goal be established to increase the pool of trained researchers who have an interest and an expertise in pediatric AIDS.

Pediatric clinical trials

The Committee is encouraged by the level of attention that pediatric AIDS has begun to receive and expects the NIAID to provide the same level of support to pediatric AIDS clinical trails as provided for in the conference report accompanying the fiscal year 1991 appropriations bill.

The Committee, however, is very concerned that the level of cooperation and coordination among the various Institutes improve in order to assure the Committee that the expanded resources provided to the institutes in the area of pediatric AIDS are being appropriately distributed and most productively expended.

The Committee expects a detailed report by January 1, 1992, on the division of labor among the Institutes regarding pediatric AIDS basic research, clinical trails, drug development, opportunistic infection, and other areas of interest and inquiry relating to pediatric AIDS. For example, the report is to include the level of resources devoted to these activities in each Institute. The Committee is very concerned that an overall research plan involving the relevant Institutes, especially NICHD, NIAID, and NCI, be developed in order to appropriately allocate future funds and against which to measure progress in this field.

Elimination of tuberculosis

The Committee continues to be encouraged by the NIAID research contribution to tuberculosis elimination. A critical component of the strategic plan for the elimination of tuberculosis is the development and evaluation of new treatments and diagnostic and preventive technologies. The Committee is pleased that TB grant support has grown from 4 grants to approximately 20, and recommends continued focus on this important area of study.

Tropical diseases

Tropical diseases cause tremendous disability and death in the developing world as witnessed by the current cholera epidemic in South America. Some tropical diseases, such as toxoplasmosis, tuberculosis, and Lyme disease, also threaten the health of persons in the United States, and almost all tropical infectious diseases pose very real threats to the 40 million Americans who work or travel abroad each year. Much of the public health science and technology utilized in Desert Storm was realized from the research efforts of scientists funded by the NIH programs in tropical and infectious diseases. The Committee remains convinced of the importance of maintaining and strengthening research expertise in these areas. A significant step toward this end is increased investigator-initiated efforts, specifically in the areas of vaccine development and pathogenesis. The Committee urges NIAID to give priority to the tropical disease area during the coming year.

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES

Appropriations, 1991	$760,010,000
Budget estimate, 1992	833,180,000
House allowance	820,160,000
Committee recommendation	815,158,000

The Committee recommends an appropriation of $815,158,000 for the National Institute of General Medical Sciences [NIGMS]. This is $18,022,000 less than the administration request, $55,148,000 more than the fiscal year 1991 appropriation of $760,010,000, and $5,002,000 less than the House allowance.

The NIGMS has as its main mission the support of basic biomedical research and research training. NIGMS-supported studies expand understanding of fundamental life processes—an understanding that lays the essential groundwork for clinical research on specific diseases. This year, as in the past, NIGMS grantees have made substantial contributions to scientific progress. Many of their achievements have been recognized with prestigious awards. The most notable of these is the Nobel Prize in chemistry, which was awarded to a longtime NIGMS grantee for his contributions to the field of synthetic chemistry. In addition to funding this investigator's studies for the past 20 years, NIGMS currently supports more than 200 other scientists working in this active and productive research area.

Genetics

The Committee's funding recommendations permit continual fundamental research in the area of genetics. Genetics research not only yields information leading to better diagnosis and treatment of the more than 4,000 genetic disorders, but also provides basic tools and techniques useful in the biotechnology industry and in other basic research studies. This year, for example, an NIGMS-supported geneticist discovered a protein that stops cell division in bacteria. Not only does this finding have implications for a better understanding of cancer, which is characterized by uncontrolled cell division and growth, but further studies of the protein may also permit biotechnology firms to improve yields of certain bioengineered products.

A key goal of geneticists is to learn how regulatory proteins turn genes on and off by recognizing and binding to the genetic material DNA or RNA. Information about protein binding sites has traditionally been obtained either by comparing a number of naturally occurring sites or by making mutations in DNA or RNA and examining how binding is affected by the changes. Now, a researcher has developed a new method that greatly simplifies the identification of such binding sites. The method is likely to have far-reaching implications for both basic and applied research.

Cellular and molecular basis of disease

The Committee's funding recommendation permit continued basic research into cell biology. New research tools and the interaction of many disciplines have revolutionized the study of cell biology. Genetic, biochemical, physical, and structural techniques are now commonly used experimental strategies. The goal is to provide greater understanding of how living cells and their components function.

Some of the grantees supported by this program study fundamental aspects of the immune response. Recently, an NIGMS grantee identified the changes in single amino acids—the building blocks of proteins—that account for the exquisite specificity and high affinity of antibodies. Antibodies are proteins produced by the immune system that bind to target molecules recognized as foreign substances. This work should enable scientists to understand better the fundamental molecular mechanisms underlying autoimmune diseases, such as rheumatoid arthritis and systemic lupus erythematosus, in which the body mistakenly mounts an immune response against its own tissue.

Pharmacological sciences

The Committee supports continued research to increase the understanding of the interactions of drugs with living systems. Such understanding will lead to the development of new, safer, or more effective therapeutic agents. The program supports research of a multidisciplinary nature that unites such fields as chemistry, genetics, molecular biology, and computer science with the more traditional areas of pharmacological investigation in an effort to characterize interactions between drugs and cellular components at the molecular level and to understand how these interactions permit therapeutic effects.

Recently, several important findings have emerged from studies of drugs that act on the immune system. For example, research on certain drugs that suppress the immune response, thus helping to prevent rejection following organ transplantation, is expected to lead to more effective and less toxic immunosuppressive agents, as well as to provide new insights into the workings of the immune system.

Biophysics and physiological sciences

Funding provided by the Committee will support studies on the structure and function of proteins and nucleic acids. Since molecular structure, to a large extent, determines function, such studies can lead to the design of techniques to manipulate and enhance the activity of a molecule by altering its structure.

This year, different groups of researchers have succeeded in determining the structures of two key proteins that are important components of the AIDS virus. They and other scientists will now target these active areas of the proteins in their efforts to design anti-AIDS compounds. Another grantee has developed a computer modeling program that enabled him to discover that the common antipsychotic drug haloperidol binds to the AIDS virus and inhibits its activity. While the drug is effective only in amounts that would be lethal for humans, this finding provides a very promising starting point for the design of similar, but less toxic, agents to halt the virus.

Minority initiatives

Funds provided by the Committee will support programs that are aimed at increasing the number of minority biomedical scientists making it the primary focal point at National Institutes of Health for minority biomedical research and research training programs. The Minority Access to Research Careers Program relies on research training mechanisms to achieve its goals. In fiscal year 1991, the program expanded eligibility for its honors undergraduate research training grants to include, on a pilot basis, students in the first 2 years of college. NIGMS also initiated a new minority predoctoral fellowship program that is open to all eligible students at colleges and graduate schools throughout the country. This program complements the ongoing MARC predoctoral fellowship, which is available only to students who were MARC honors undergraduates.

The other activity that forms a key part of the NIGMS minority effort is the Minority Biomedical Research Support Program, which awards grants to educational institutions with substantial minority enrollments to support research by faculty members, strengthen the institutions' biomedical research capabilities, and provide opportunities for students to work as a part of a research team.

Research training

Funds recommended by the Committee will support the many research training programs that prepare new scientists to carry out the future research needed to maintain a healthy biomedical research enterprise. NIGMS training programs recognize the interdisciplinary nature of biomedical research today and prepare trainees to pursue research careers in a wide variety of fields. In addition to its traditional training activities, the Institute supports several special training initiatives: the Medical Scientist Training Program, which provides investigators who can bridge the gap between basic and clinical research; the Biotechnology Research Training Program, which trains scientists to conduct research in biotechnology; and the Molecular Biophysics Training Program, which prepares scientists to do structural biological research of particular relevance in the search for anti-AIDS drugs.

NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT

Appropriations, 1991	$478,956,000
Budget estimate, 1992	520,584,000
House allowance	524,661,000
Committee recommendation	523,826,000

The Committee recommends an appropriation of $523,826,000 for the National Institute of Child Health and Human Development [NICHD]. This is $3,242,000 more than the administration request, $44,870,000 more than the 1991 appropriation of $478,956,000, and $835,000 less than the House allowance.

The research programs of the NICHD are designed to ensure the health and well-being of all Americans. That goal is pursued through the support and conduct of research addressing some of the urgent public health problems facing our Nation. These problems include a high national infant mortality rate; maternal, pediatric, and adolescent AIDS; sudden infant death syndrome; factors that inhibit the physical or behavioral development of children; and the physical disabilities that result from impaired development, accidents, or disease. The NICHD also supports research to develop more effective and safer methods of contraception and to gain a better understanding of the biology of human reproduction.

Within the funds provided is the requested amount for the proposed SHARP survey of adult sexual behavior.

The Committee is increasingly concerned about the impact of reductions from cost on the scientific research conducted by NICHD-supported research centers. The funding cuts affect the core facilities, central laboratories, research equipment, and technical support staff of center programs, and impede their important research. Consequently, the Committee directs the NICHD to limit research center reductions from costs in fiscal year 1992 to a level below the levels of negotiated reductions implemented during the previous 2 fiscal years.

Preventing infant mortality

Nearly 39,000 babies die before their first birthday in the United States each year. However, some progress is being made toward reducing these numbers. The Nation's infant mortality rate is at an all-time low and provisional data for 1990 indicate that there was a 6-percent decline in infant mortality from the 1989 rate. This is the largest recent single-year drop. A portion of this drop is attributable to the introduction of surfactant to treat respiratory distress syndrome [RDS]. With the use of surfactant, nearly 1,000 fewer infants died of RDS this past year than in the previous year. NICHD supported research that demonstrated that surfactant deficiency causes RDS as well as some of the preliminary testing and evaluation of surfactant and played a role in its introduction to clinical use.

Sudden infant death syndrome [SIDS]

The Committee is very pleased with the progress being made by NICHD to increase support for sudden infant death syndrome research. During the coming year, the 5-year SIDS research plan calls for the initiation of several important new projects including studies on the maturation of life-sustaining mechanisms during sleep and the role of infections in SIDS. The Committee has provided $7,500,000, the funding necessary for the 5-year SIDS research plan to continue ongoing projects initiate those recommended by the 5-year plan, and support other investigator-initiated grant proposals. The Committee is enthusiastic about the acceleration of NICHD efforts to address this disorder that accounts for the deaths of 7,000 to 8,000 infants per year in the United States.

The Committee is pleased with the ongoing development of the child health research centers program by NICHD and the continued enthusiastic response to this innovative bench-to-bedside initiative by the pediatric research community. The seven initial child health research center grants reflect the goals of the Committee: to increase the number of pediatricians with basic science skills who will direct their efforts to research problems in clinical pediatrics and to build institutional capacity in research at both established and developing pediatric institutions. Consistent with these objectives, the Committee intends that no incumbent child health research center grant recipient be eligible for more than one competitive renewal, so that maximum resources can be targeted to developing the core of pediatrician investigators nationally. The Committee intends that the maximum award for each center be $400,000 annually.

Child health research centers

The Committee is providing an additional $3,000,000 to fully fund the child health research centers program in fiscal year 1992. Coupled with ongoing centers commitments, the Committee anticipates that NICHD will expend a total of $5,000,000 on this program in fiscal year 1992. This measured growth is consistent with the overall programmatic goals identified by the Committee when the child health research centers program was established in fiscal year 1990. Within these funds, the Committee urges priority consideration be given to funding the Bush Center located at Yale University for the purpose of advanced interdisciplinary training in child development and social policy.

National Center for Medical Rehabilitation Research

The Committee is pleased that NICHD has taken steps to establish a National Center for Medical Rehabilitation Research as authorized by Congress in November 1990. This new center will conduct and support research in medical rehabilitation, support research training programs, and further research in devices such as prostheses to assist physically disabled individuals. An advisory board for the center has been appointed, has held its first meeting, and is in the process of developing a research plan to shape future activities and priorities of the center. The Committee has provided an additional $5,000,000 over the amount requested for a total of $8,000,000 in 1992.

The Committee urges that the Center give priority to several research initiatives including: The need to better understand and ameliorate the cognitive problems associated with spina bifida; the need to better understand and prevent the loss of IQ points due to improper care of arrested hydrocephalus; and the need for greater understanding of gait analysis and the efficacy and value of bracing in enhancing ambulation. Additionally, the Committee expects research on the development of prosthetic and orthotic devices to be a priority and a special focus on the needs of those with traumatic head injury.

Women's health

The Committee is pleased that the NICHD, with its research programs in pregnancy, contraceptive development and evaluation, reproductive health, and infertility, has consistently emphasized the importance of women's health issues. This interest continues and the Institute's program in women's health is being augmented by strengthening the intramural research program in gynecology and by insuring that in fiscal year 1992 there will be a minimum of two centers focusing on infertility research and three centers concentrating on contraception research. The Committee has added $3,000,000 to further support the infertility and contraception research centers.

Women have approximately a 25-percent chance of developing uterine fibroids, benign growths on the uterus. Fibroids are found most often in women in their thirties and forties, but they can occur in a woman of any age. African-American women appear to develop fibroids at a younger age than any other racial or ethnic group. Little research has been conducted on the physiology of fibroids, therefore, treatment options remain limited to either a myomectomy or hysterectomy.

The Committee has provided funds to the Office of Women's Health Research and the NICHD to explore the basic biological physiology of fibroid development and growth and to support clinical trials to facilitate early diagnosis.

Vaccine development

NICHD intramural scientists were instrumental in the development of the first vaccine effective in infants against *haemophilus influenzae* type b. This conjugate vaccine, which was recently licensed by the Food and Drug Administration, will soon be in wide use and has the potential of nearly eliminating H. flu meningitis as a cause of mental retardation and deafness.

Maternal and pediatric AIDS

The Committee is greatly concerned that the incidence of HIV infection among women and children is increasing. Last year, about 6,000 HIV-infected women gave birth and 1 in 3 passed their infection on to their infant. The NICHD announced the results of a clinical trial which showed that monthly administration of intravenous immunoglobulin, a solution that contains concentrated antibodies, significantly reduces the number of serious bacterial infections, reduces the number of hospitalizations required, and prolongs by as much as 1 year the time free from serious bacterial infections in children who are experiencing symptoms of HIV infection. This study was terminated 1 year early so that the benefit of its findings could be made available immediately to symptomatic HIV-infected children.

The Committee has added $2,000,000 to the requested amount for additional pediatric AIDS research, particularly for the clinical trials program, and directs that an additional $2,000,000 be made available for an increase of $4,000,000 over the requested level for pediatric AIDS.

The Committee has provided these increases to enable the NICHD to increase both the number of sites and the number of protocols being investigated in its AIDS clinical trails units; to further address significant pediatric biomedical and biobehavorial research such as the early diagnosis of HIV infection in neonates and infants; and to restore funding reductions made in existing NICHD pediatric AIDS research projects.

Mental retardation

The results from a large-scale study jointly supported by the Robert Wood Johnson Foundation and the NICHD demonstrated that early intervention such as home visits to improve parenting skills and special enrichment programs for preschoolers can prevent many behavioral problems and raise IQ scores in at-risk children. IQ scores at age 3 were significantly improved for infants of all birth weights who received the intervention services. In contrast, nearly one-half of the at-risk children who did not receive the intervention program had IQ scores below 85, a level associated with significant learning problems. The Institute plans to reassess these children at age 6 to ascertain if they have maintained the gains achieved.

Study of early child care

The Committee is very supportive of NICHD's multisite research project in which young children are evaluated from birth through 3 years of age in various modes of child care and in various family environments. This 10-site study, begun last year, will yield a great deal of policy-relevant information about variations in child care arrangements and their effects on children's development. The Committee reiterates the view that NICHD should fully support this study and urges the Institute to put sufficient funding toward additional assessments of each child in the study. The Committee further urges NICHD to investigate the possibility of using the cohort of this study for continued longitudinal research and hopes to hear from the Institute about options for continued study of the approximately 1,200 children who are recruited for this important project.

Adolescence and risk

The years from 15 through 24 are a time when health hazards increase dramatically as a consequence of behavior. The growing independence and experimentation of adolescents exacerbate the risks of injury, involvement with drugs and alcohol, experimentation with sexual activity, and development of unhealthy dietary and exercise habits that may last long into adulthood. Because adolescence is a pivotal age span, it is important for the NICHD to expand its studies of adolescents and their risk-taking behavior.

The year 2000 health objectives call for a reduction in the rate of unintentional injuries resulting in death by 15 percent, a reduction in the rate of suicides by 10 percent, in the rate of homicide by 15 percent, and in the rate of teenage pregnancies by 30 percent. To help meet these objectives, and others, more research needs to be done on effective prevention strategies and interventions in adolescence, and more basic research is needed within the social environment in which adolescents make many health-related decisions.

The Committee urges NICHD to begin planning for the establishment of a center for the study of adolescents and risk. A center is the most appropriate funding mechanism for this research because the risks facing adolescents span the expertise of various scientific disciplines. This is consistent with a recent Office of Technology Assessment report, "Adolescent Health," which notes, "Preventive efforts that use comprehensive approaches involving multiple systems and addressing multiple issues may be more effective than traditional single-issue, single-focus approaches."

Osteogenesis imperfecta [OI]

The Committee is interested in the research currently taking place in the use of lightweight bracing and aggressive physical therapy to control the effects of brittle bone disease. The Committee would like to see NICHD continue to support research into the growth problems and the mechanisms of bone remodeling. These areas are of great concern, not only to individuals who suffer from OI, but also to every American who has ever broken a bone.

Normative research on ethnic minorities

The Committee urges NICHD to develop a request for applications for normative research on ethnic minorities. Because most developmental research on minorities focuses on high-risk groups affected by poverty, lack of education, lack of health care, and other conditions, there is a critical lack of research about normative developmental experiences of ethnic minorities. While problem areas are critically important for research, it is also important to identify the general norms for various aspects of development in African-American, Asian-American, and Latino children and youth. There is a scientific need for normative research in order to establish a basis for comparison when evaluating the effectiveness of early educational interventions and other childhood programs, and there is a need to dispel the distorted images that result from this unbalanced or incomplete research data base.

Child maltreatment research

The Committee is aware of the national and international efforts that the NICHD intramural laboratory is making in trying to uncover both the roots and consequences of child maltreatment. Given the enormous policy implications of this research, the Committee commends the Institute for this research direction and encourages its expansion.

Population research centers

The Committee is very supportive of the population research centers program and urges continued strong support for the program. Increasing the number of centers from 9 to 11 and additional demographic research are high priorities the Committee would be please to see accomplished. The Committee notes that none of the existing population research centers are in the Pacific Northwest.

NATIONAL EYE INSTITUTE

Appropriations, 1991	$253,241,000
Budget estimate, 1992	272,260,000
House allowance	272,260,000
Committee recommendation	267,229,000

The Committee recommends an appropriation of $267,229,000 for the National Eye Institute [NEI]. This is $5,031,000 less than the administration request, $13,988,000 more than the 1991 appropriation of $253,241,000, and $5,031,000 less than the House allowance.

Vision involves a series of highly complex processes including conversion of light into neural impulses, eye movements, continual changes in shape of the lens, and brain processing. Because we depend very heavily on the visual system, disturbance of any part of this elaborate and precise system can lead to serious visual disorders and even blindness. The NEI conducts and supports basic and clinical research and research training to determine new and improved ways to prevent, diagnose, and treat diseases of the eye and visual system.

Age-related macular degeneration [AMD]

The Committee notes that results of a recent survey have revealed that as many as 1 million Americans may now be blind. This is a disturbing new finding. Aging is the most significant cause of blindness with disability from AMD being a major problem. The macula is the portion of the retina responsible for sharp and straight-ahead vision. Studies focusing on why age-related macula changes occur is a major priority of the NEI. To gain an increased understanding of the aging eye, the NEI is supporting and conducting research on age-related eye diseases—cataract, glaucoma, and diabetic retinopathy, in addition to macular degeneration. Research ranges from a large-scale study to track the natural history of AMD to attempts at retinal cell transplantation.

Glaucoma

The Committee-recommended levels permit continued research on glaucoma. In the United States, glaucoma is the second leading cause of blindness. While many cases of glaucoma can be controlled, the damage to the eye and loss of sight cannot be reversed. Open-angle glaucoma alone affects about 2 million Americans. NEI-supported studies have confirmed that blacks, especially males, are at especially high risk to glaucoma. Not only is there an increased rate of occurrence, but also the disease is more severe. NEI is working to find new and improved ways to determine the causes of the various forms of glaucoma to ultimately find a cure. The NEI-supported glaucoma laser trial has yielded promising results: argon laser therapy appears to be a safe alternative to eye drops for newly diagnosed open-angle glaucoma patients. Researchers have taken a major step toward alleviating the glaucoma-inducing side effects of steroid eye drops—they have identified the major protein species induced by steroids, cloned the genes which encode them, and are now in the process of determining how the genes' expression is regulated.

Vision research in the Decade of the Brain

Funding provided by the Committee permits research in many areas including cross-eye, glaucoma, wall-eye, myopia (nearsightedness), amblyopia (lazy eye), optic nerve damage, and low vision. Advanced techniques in molecular biology, neural imaging, and computational neuroscience have fostered extensive visual neuroscience research progress and opportunities for pioneering vision research in the Decade of the Brain to improve the treatment and prevention of blinding eye diseases and to unlock the basic mechanisms of many visual processes. Researchers are striving to identify the molecules associated with the development and regeneration of the visual nervous system, to locate and examine the structure of genes that control their expression, and to identify and study the actions of visual system neurotransmitters and neuromodulators.

Cost/benefit of eye research

The Committee is pleased to note that significant improvements in health and the quality of life have accrued from the Nation's investment in eye research. This research has been, and remains, extremely cost effective. Initiated in 1976 at a total cost of less than $11,000,000, the diabetic retinopathy laser therapy trial has yielded savings in excess of $1,200,000,000 in terms of decreasing blindness from this disease. Projected savings from the recent NEI-supported cryotherapy for retinopathy of prematurity study are estimated to be as much as $274,000,000 per year.

Representation on advisory boards

Last year, the Committee urged the National Eye Institute to provide equitable and representative appointments to its advisory and review committees from experts within optometry and ophthalmology. The Committee continues to feel that optometrists have historically not been adequately considered for appointment to these important policy bodies and thus was distressed to learn that there is now only one optometrist on the NEI National Advisory Board, notwithstanding the Committee directive. Accordingly, the Committee most strongly urges NEI to utilize the expertise of qualified optometrists and, further, to provide the Committee with a report regarding the extent to which grants have been provided to optometry schools within the past 3 years.

NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES

Appropriations, 1991	$241,028,000
Budget estimate, 1992	254,484,000
House allowance	254,912,000
Committee recommendation	250,873,000

The Committee recommends an appropriation of $250,873,000 for the National Institute of Environmental Health Sciences [NIEHS]. This is $3,611,000 less than the administration request, $9,845,000 more than the 1991 appropriation of $241,028,000, and $4,039,000 less than the House allowance.

The NIEHS conducts and supports research and research training to identify chemical, physical, and biological environmental agents that threaten human health. The Institute also studies mechanisms by which these agents both independently and interactively cause or contribute to illness and dysfunction in the general population and in particularly vulnerable individuals. NIEHS research includes laboratory-based biomedical studies, toxicology, epidemiology, computer sciences, and biometry supported by the latest scientific technologies.

Research highlights

The Committee is pleased with the NIEHS' effort to study the health effects of agricultural chemicals. A new research center was recently added to provide a broad range of studies of agricultural and rural environmental exposures using the combined expertise of 10 academic departments. This new center augments ongoing toxicologic studies managed by NIEHS scientists and individual research grants to several universities. The results of this research will be used by health care providers, environmental protection and agriculture agencies, and farmers, farmworkers, and their families to improve the safe and effective use of agricultural chemicals.

Health effects from exposures to metals such as lead, mercury, and chromium in the environment are also being studied. New information suggests that the transfer of lead from the mother to the fetus during pregnancy is a greater risk than was previously realized. However, NIEHS is supporting research that is finding that a healthy diet protects against the adverse effects of low-level lead exposures both in pregnancy and in infants and children. Other research is leading to guidelines for the more effective use of currently available drugs for the treatment of lead poisoning and to safer new drugs.

Sustained research

Funding provided by the Committee will permit the development of new and better scientific methods to detect and provide data necessary to evaluate health threats from environmental agents. Advances are noted in new tests methods such as the identification of oncogenes which seem to discriminate between exposure to different pollutants and identify people who are most susceptible or affected. Other new tests are being developed and basic research studies are aimed at reproductive and developmental, neurologic, and immunologic effects, recognizing that environmental agents have been shown to cause serious, chronic diseases and conditions other than cancer.

National Toxicology Program

The Committee continues to be concerned that toxicity testing capabilities are not keeping pace with the large and expanding backlog of potentially toxic substances which have not been adequately tested for human safety. Standard animal-based tests are not up to this challenge. More emphasis should be placed on alternative methods as they are often less expensive, quicker, and more reliable.

The key problem in implementing new alternative methods is insufficient validation for effectiveness in large-scale, multilaboratory studies. The Federal Government's focal point for validating new tests is the National Toxicology Program [NTP], an interagency program specializing in toxicity testing. Unfortunately, the NTP's validation budget has not kept pace with inflation. Therefore, the Committee urges that an additional $1,000,000 be made available for the NTP's validation budget.

Other priorities

A priority should be assigned to the testing and assessment of the effects of exposure to various noncancer toxins, especially those most effectively studied with the methodologies of the behavioral and social sciences. Areas of critical concern include neurological effects (for examples, attention and memory deficits), developmental effects (for example, behavior disorders and learning dysfunctions), and mood and personality effects. The nature and magnitude of these effects have not received appropriate attention, especially where they may occur among special populations at risk for health effects because of their age, reproductive status, geographic location, or racial, ethnic identification.

Additionally, efforts to improve the effectiveness of environmental research and development should focus on the behavioral and social science problems associated with decisionmaking, communication, and education, especially where knowledge in these areas can contribute to remediation of environmental risk, reduction of hazardous waste, and pollution prevention. Research of basic and applied focus is required, as is continuing and postdoctoral education. Funding support for analysis of individual motivation and behavior and additional analysis of corporate motivation and response to incentives will be fundamental to the overall priorities of reducing and preventing environmental risk. Because local communities and governments are increasingly responsible for implementation of regulatory standards and because community right to know legislation requires effective transfer of information as well as technology, assessment and evaluation of effective communication is equally necessary.

NATIONAL INSTITUTE ON AGING

Appropriations, 1991	$323,752,000
Budget estimate, 1992	348,558,000
House allowance	362,528,000
Committee recommendation	363,176,000

The Committee recommends an appropriation of $363,176,000 for the National Institute on Aging [NIA]. This is $14,618,000 more than the administration request, $39,424,000 more than the 1991 appropriation of $323,752,000, and $648,000 more than the House allowance.

The NIA conducts and supports research, research training, and health information dissemination for the biomedical, behavioral, and social aspects of aging, and serves as a major catalyst in advancing knowledge about aging processes, diseases, problems, and needs of older people.

Alzheimer's disease [AD]

There is perhaps no other affliction that rivals AD in its impact on the family and cost to society. A recent study estimated that 4 million people in the United States have developed AD; over one-half of nursing home residents are there due to AD. The estimated cost of caring for the victims of AD exceeds $80,000,000,000 per year. New discoveries from molecular biological investigations, coupled with progress in clinical research, point to promising new research directions. A new analysis indicates that a 5-year delay in the onset of AD could result in a 50 percent reduction in both the incidence of the disorder and a halving of the costs to society. To confront these challenges and to capitalize on significant new scientific opportunities, the NIA conducts research in the following areas of basic and applied research: the cause of AD, with emphasis on studies of the amyloid protein; an intramural initiative on the molecular biology of AD; the search for selective risk factors; development and testing of better diagnostic techniques, new treatments, and management techniques; and family burden of care. The Alzheimer's disease research centers, including their satellite sites, provide focal points for AD research supported by the NIA. To speed the dissemination of research findings, the NIA supports the Alzheimer's Disease Education and Referral Center [ADEAR].

The Committee hopes to double the amount being invested in Alzheimer's over the near term. As a down payment to that goal the Committee has added $18,750,000 to the NIA Alzheimer's research. At the NINDS the total amount to be spent on Alzheimer's research at NIH in fiscal 1992 is $234,000,000, or 59 percent of the way toward the goal of doubling fiscal year 1991 effort.

Cognition and memory

NIA funds a number of basic research projects designed to reveal the interactions between memory and brain function in normal aging. The Committee recognizes the importance of differentiating normal decreases in cognitive function from the early signs of dementia and supports research on the basic processes by which older adults learn, remember, and process information. An important theme in research done to date is that memory in older adults is enhanced by cues from the environments that are most familiar. The Committee supports additional research on memory and the environments of the aging, since this area of inquiry may provide useful information in the etiology of Alzheimer's disease and other dementing illnesses. NIA is encouraged to fund additional research on basic brain and memory interactions.

Caregiving

Americans have a longer life expectancy today than ever before, but many will face the prospect of a disabling illness at some point over age 65. Many of the disabled will be cared for by family members or relatives. Research funded by NIA is beginning to show the difficulty of functioning as a caregiver. One study showed that female caregivers exhibit more stress than males, and individuals living with and married to the patient, or with small social networks, are at greater risk for negative outcomes such as stress-related illness, episodes of abuse, or depression. More research is needed to determine the most effective ways to relieve caregivers of some of their burden and to demonstrate effective ways in which to educate caregivers and their patients about the dangers of excessive stress.

Neurochemical technology

Continued advances in neurochemical measurement technology make this among the most promising areas of research into neurodegenerative disorders such as Alzheimer's, Parkinson's, and Huntington's disease. The Committee is very pleased that the Institute on Aging has taken a leadership role in the continued development of this technology and strongly encourages continued support for this critical research and medical technology.

Claude D. Pepper older Americans independence centers

The Committee is impressed with work of the four new Pepper centers which test new ways to maintain and increase independence for older Americans. Over 30 applications were received for the new centers program but only enough funds were available to establish four centers. These centers embrace collaborative efforts in geriatric research and provide training and career development for academic leadership to fill the need for geriatricians and other health care providers trained in geriatrics. An additional $2,000,000 is provided to enhance funding of the existing centers and to establish two more centers.

The Committee is aware that the State of Iowa has a large portion of its population over the age of 65. In addition, the University of Iowa's research strength in epidemiology focused upon patterns of health and disease in aging populations and the comprehensive strengths of its College of Medicine and teaching hospital make it a strong candidate for the award of such a center.

Frailty, independence, and understanding aging

The report requested by the Committee on research and prospects for progress on the problem of physical frailty was submitted by the NIA. Together with the severe mental frailty caused by Alzheimer's disease, the problems causing severe physical frailty account for the major threats to independence and the need for long-term care among older Americans. Nearly one-third of those over age 75 living in the community—at least 3.2 million older adults—are in this severely afflicted group. Because frailty increases the risk of falls, fractures, functional dependence, and the need for long-term care, it also imposes extraordinary costs on society—upward of $54,000,000,000 yearly. A growing body of knowledge confirms that people are never too old for prevention or reduction of physical frailty. The NIA program initiatives include studies of underlying pathophysiology; the design of innovative strategies for prevention, treatment, and rehabilitation; trials for promising interventions; and research training and career development. The NIA will continue to support investigations on understanding and treating osteoporosis which affects approximately 24 million older Americans—mostly women. The NIA also supports research on urinary incontinence afflicting more than 10 million older persons, the majority being women. Research will continue on cardiovascular disorders which have led to nursing home placement for more than 108,000 older Americans; and on cancer where more than two-thirds of cancer deaths occur in adults over the age of 65. The Claude D. Pepper older Americans independence centers program provides focal points for testing new ways to maintain and increase independence for older persons. Other basic biological, behavioral, and social risk factors that compromise independent functioning in older Americans will continue to receive emphasis.

Minority initiatives

The Committee is pleased with the several initiatives in minority aging supported by NIA. African-American, Asian, Hispanic, and native American populations are a rapidly growing proportion of the U.S. aging population. These populations differ from nonminorities in many respects, including longevity, health status, living arrangements, health-related behaviors, and health care and service utilization. However, the exact nature of such differences and similarities are poorly understood or documented. Research on minority aging is further complicated by differences across ethnic and racial minority populations. NIA-supported studies focus upon characterizing and examining specific conditions and disease processes, healthy aging, family life, work and retirement patterns, and other aspects relevant to older minority populations. Such projects include research on long-term care within elderly minority populations. Other initiatives focus on increasing the involvement of minority investigators in research on aging. The Dissertation Award Program established this year provides support to minority doctoral candidates during this phase of their studies.

Women's health issues

NIA's increased emphasis in research relevant to women's health is documented in the recent NIA Women's Health Issues Congressional Report. These areas include osteoporosis, especially as it relates to hip fractures, physical frailty, urinary incontinence, and menopause and hormonal changes with age, and women as caregivers. The NIA will continue to address issues of particular relevance to women through research such as the NIA's women's aging study initiated this year, the Baltimore longitudinal study on aging, and participation in the NIH-wide women's health initiative.

Health and behavior

The Committee is interested in several health and behavior initiatives at NIA which have implications for future policies and planning for the health of older Americans. Therefore, the Committee places significant priority on funding for the following in fiscal year 1992: Health behaviors and aging, which will examine the health status of the elderly and identify potential psychosocial and other behavioral interventions for improving the health status of older people; aging and long-term care, which will identify and develop ways to respond to the long-term care needs of a rapidly increasing elderly population, particularly minority elderly and other special populations; intergenerational relationships, involving studies of family relationships, informal caregiving, changing patterns of family structure, and other basic family issues throughout the life course; and the oldest old, involving studies on the quality of life, health care requirements, economic situations, and social support for the segment of society whose needs must be adequately planned for in order to avoid potential health care crisis.

Older drivers

In many areas of the country there are few alternatives to the car as transportation. As the American population ages, better assessment and training interventions will be needed to enable some older adults to maintain their independence and mobility by driving. Researchers supported by the National Institute on Aging have recently found a visual measurement that correlates with a tendency in some older drivers to have accidents. The visual defect revealed by this test can be improved with training. Additional research is needed to reveal the extent to which driving performance of formerly visually impaired adults can be improved by training interventions. The Committee urges NIA to spend additional funds on studies in this important area of research from within available funds.

Cardiovascular aging research

Cardiovascular diseases, including heart attack and stroke, remain the No. 1 killer of older Americans and a main cause of disability. These diseases affect over an estimated 70 percent of Americans over age 60. The number of deaths from cardiovascular disease rises significantly with increasing age, as do incidence and prevalence of cardiovascular disease. The Committee believes that additional research on cardiovascular aging and basic biological age-related changes is important, particularly in these areas: a study on the relationship between disease processes of atherosclerosis and aging; a study on aging and the cardiovascular system; and the development of a laboratory of vascular studies to provide information on aging-related changes in the molecular biology of blood vessels. The Committee requests the NIA to review the feasibility of these initiatives within available funds.

Urinary incontinence

The Committee finds that urinary incontinence is a major cause of disability and long-term care needs among older people. Almost two-thirds of the 1.5 million older Americans in nursing homes suffer from urinary incontinence. The condition greatly diminishes the independence and dignity of an estimated 10 million Americans. The Committee is very encouraged by a study released by the NIA and the nonprofit Alliance for Aging Research which establish a low-cost method of bladder training as effective in 75 percent of women involved in clinical trials and calls for further research in this area. The Committee feels that incorporation of this new clinical treatment into practice guidelines in the Medicare program could result in substantial cost savings to the Federal Government.

Additional priorities

The Committee urges the NIA to continue to support research on frailty, hip fractures, osteoporosis, and Paget's disease of the bone which adversely effect the elderly.

The Committee encourages collaborative efforts between NIA and the NCNR, particularly regarding the research initiatives to improve the management of Alzheimer's disease symptoms. Further collaboration with NCNR on other health concerns of older persons, such as the prevention of falls, urinary incontinence, and pressure ulcers would be appropriate. The Committee is aware that over the years NIA has taken the lead in developing collaborative efforts with the NCNR and appreciates its efforts.

The Committee feels that research on aging offers the best opportunity to reduce risk factors leading to the loss of independence and the need for costly long-term care among older Americans. Research on aging also provides unique opportunities to gain new insights into diseases that affect Americans of all ages, by uncovering findings not apparent in younger subjects. Results from studies on aging can then be applied for the benefit of all.

Osteoporosis clearinghouse

The Committee would like to ensure that those who have osteoporosis, their families, and those concerned about the disease have a means of obtaining the most up-to-date, scientifically accurate information. The Committee encourages the National Institutes of Health [NIH] to establish a resource center which can provide information and materials and coordinate education for physicians and allied health professionals. Additionally, the center should include a resource library, a means for tracking activities at the State level, and a range of information on services for those with osteoporosis.

The Committee further believes that the National Institute on Aging [NIA] has a distinguished record of research in aging and is well suited to oversee the development and functioning of such a resource center. The resource center should reside outside of the NIH in order to assure both independence and its ability to encompass a wide range of issues outside the usual reach of the Institute. The Committee directs that $500,000 be made available for this effort within available funds.

NATIONAL INSTITUTE OF ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES

Appropriations, 1991	$193,247,000
Budget estimate, 1992	204,797,000
House allowance	204,977,000
Committee recommendation	203,076,000

The Committee recommends an appropriation of $203,076,000 for the National Institute of Arthritis and Musculoskeletal and Skin Diseases [NIAMS]. This is $1,721,000 less than the administration request, $9,829,000 more than the 1991 appropriation of $193,247,000, and $1,901,000 less than the House allowance.

The NIAMS conducts and supports basic and clinical research and research training on arthritis and musculoskeletal and skin diseases, and on the normal structure and function of joints, muscles, bones, and skin. The Committee urges consideration of the establishment of a neuroskeletal science center for the study of neurological and skeletal disorders.

Osteoporosis

The Committee is pleased with the high priority NIAMS has placed on osteoporosis. Osteoporosis, a condition in which bone mass is low, represents a major public health problem in the United States. It affects some 24 million Americans and is responsible for 1.3 million fractures each year. A key research advance of this past year was the use of the bisphosphonate drugs in postmenopausal women to stabilize bone mass and possibly to prevent new fractures.

The Institute will continue to support basic, clinical, and epidemiological research and research training in bone diseases. The NIAMS is also expected to play a major role in osteoporosis research as a participant in the NIH-wide women's health initiative.

Lyme disease

The Committee urges continued high priority be placed on Lyme's disease. To address the growing concern about the spread of Lyme disease, the NIAMS is pursuing research on the pathogenesis and the diagnosis and treatment of this disease. A workshop on the diagnosis and treatment of Lyme disease was held this year to update physicians on the latest developments. The first issue of "Lyme Lines," a semiannual newsletter targeted to both professional and lay audiences, was published through a cooperative effort with the National Institute of Allergy and Infectious Diseases. The Institute will continue to support research on the diagnosis and treatment of this disease, along with investigations into both the early and the late skin manifestations.

Osteoarthritis

The Committee is pleased to note that researchers have identified a gene that causes a form of osteoarthritis. Using modern techniques of molecular biology, scientists discovered, isolated, and characterized a faulty gene for collagen II—the main structural protein that provides strength for cartilage. The NIAMS-supported scientists are now attempting to develop a screening test to rapidly detect individuals with this genetic defect.

Rheumatoid arthritis

Progress in research on immune mechanisms involved in this disease continues. Recently, scientists protected rats from arthritis by vaccinating them with T cells from rats in which arthritis had been induced. These experiments may eventually lead to successful vaccination against arthritis in humans. In other research, the Institute has initiated a clinical trial of an antibiotic, minocycline for use in the treatment of rheumatoid arthritis.

Within the funds provided, $1,000,000 is earmarked for continuing the clinical trials on the use of antibiotic therapy for rheumatoid arthritis and research activities on mycoplasma as a cause of rheumatoid arthritis. The Committee is pleased by the steps taken by the NAIMS to initiate the clinical trials and encourage research on mycoplasma and infectious agents in the etiology of rheumatoid arthritis.

Lupus

The Committee continues to be very supportive of investigation in the area of Lupus and urges that priority be given to this area. Researchers have uncovered a promising lead in lupus research, a new antibody that is associated with psychiatric disorders due to brain involvement in lupus. Further investigation could provide insight into how these neuropsychiatric disorders develop in these patients.

The Institute is initiating a cooperative study with researchers in the Caribbean to explore why lupus is more prevalent in black women than in white women. NIAMS has launched a major effort to educate health professionals and community organizations about lupus, and has recently published an instructive brochure "What Young Black Women Should Know About Lupus."

Skin disease

The Committee learned, from a coalition of 17 national lay skin disease organizations and researchers in the field of dermatology, about the remarkable research advances on a number of diseases during the past year.

Witnesses noted that an estimated 60 million Americans are treated annually for skin disease; skin disease is one of the leading causes of lost time from work and the economic costs, including work loss, due to skin disease is staggering. Skin disease is the most common cause of chronic illness in the United States.

Research advances were noted in the areas of skin cancer, scleroderma, psoriasis, epidermolysis bullosa, severe acne, lupus, alopecia areata, and ichthyosis, to name a few.

The Committee also learned of the rapid advance of the field of dermatological disease research in the last 5 years, since the NIAMS was created.

The Committee urges the Institute to establish two additional skin disease research centers, as the two currently existing skin disease centers have proven the value of this kind of organization. An additional $2,000,000 has been included for the establishment of these additional centers.

Osteogenesis imperfecta [OI]

The Committee would like to see continued emphasis on this brittle bone disease. Great strides have been achieved in the understanding of the molecular basis of OI, but continued aggressive bone research is required. OI has an incidence at birth of 1 in 20,000. That incidence rate is the highest among connective tissue disorders. The Committee is very concerned that at present there is no postpediatric care for individuals with osteogenesis imperfecta. The Committee would like to see NIAMS support the training of medical professionals in the field.

Heritable disorders of connective tissue

There are 140 conditions categorized as heritable disorders of connective tissue. Although each disorder, such as the marfan syndrome, osteogenesis imperfecta, ehlers danlos, pseudoxanthoma elasticum, and dystrophic epidermolysis bullosa is an orphan disease by itself, the group collectively may affect over one-half million Americans. These conditions have a common denominator yet none of them have a known cause or effective treatments.

The Committee urges NIAMS to follow up on the 1990 workshop findings by issuing a program announcement to support continued molecular research on identifying the chromosomal marker and gene component of these individual disorders that can then be transferred into improved therapies and treatments.

NIAMS is also urged to consider and develop plans for a national registry to facilitate research on these heritable connective tissue diseases, taking advantage of the experience gained with the dystrophic epidermolysis bullosa and other registries.

The Committee is pleased that the NIAMS has taken the lead among the NIH institutes in targeting research on Paget's disease bone disorders. The Committee requests NIAMS to provide an NIH-wide report on its plans to address this particular disease entity.

NATIONAL INSTITUTE ON DEAFNESS AND OTHER COMMUNICATION DISORDERS

Appropriations, 1991	$134,935,000
Budget estimate, 1992	146,321,000
House allowance	144,495,000
Committee recommendation	151,608,000

The Committee recommends an appropriation of $151,608,000 for the National Institute on Deafness and Other Communication Disorders. This is $5,287,000 more than the administration request, $16,673,000 more than the 1991 appropriation of $134,935,000, and $7,113,000 more than the House allowance.

The NIDCD conducts and supports research and research training in the normal and disordered processes of hearing, balance, smell, taste, voice, speech, and language. The Institute also conducts and supports research and research training that is related to disease prevention and health promotion. NIDCD addresses special biomedical and behavioral problems associated with people who have communication impairments or disorders and supports efforts to create devices which substitute for lost and impaired sensory and communication functions.

More than 1 in every 10 Americans has a communication disorder. As the population ages, the prevalence of communication disorders will continue to grow rapidly. Also, increasing numbers of infants, toddlers, and children have hearing, speech, and language disorders, and the prevalence of working age adults with communication impairments is on the rise as a result of accident-related head injuries. Communication disorders cost the U.S. economy $20,000,000,000 a year in lost productivity, special education, and health care costs. A substantial increase in funding for NIDCD is needed in order to fund research into the causes, identification, treatment, and prevention of communication disorders in people of all ages.

Funding priorities

The Committee has included an increase of $8,000,000 for NIDCD to focus on a number of important research priorities listed below. The Committee expects to receive a report on how the Institute has allocated these additional funds to meet the several listed priorities.

—The Committee mandates the NIDCD to place increased attention on identifying and understanding the processes that cause degeneration in any part of the auditory system in order to prevent degeneration or to resume function;

—The Committee recognizes that NIDCD studies are on the verge of discovering how to repair and return to normal function hair cells in the inner ear. Understanding the enormous benefits of this advancement, the Committee strongly advises further research in this area;

—The NIDCD should emphasize research into the molecular genetics of deafness and other communication disorders that are clearly hereditary;

—The Committee recognizes the great strides in genetic research supported by the NIDCD and directs them to continue to clone and characterize the genes of Usher's Syndrome (type 2) and Waardenburg's syndrome. These accomplishments will enable treatments to be developed that will prevent deafness resulting from these disorders;

—Additional research should be encouraged to identify the causes and effective management strategies of tinnitus (ringing or noises in the ear) which effects millions of Americans;

—The Institute should continue to pursue research in signal coding and processing and the psychophysics of speech perception to develop new strategies for hearing aid users;

—The Institute should determine the most effective means of identifying hearing impairments in newborn infants;

—The Committee encourages further understanding of the biological and acoustical conditions that lead to noise-induced hearing loss from both the recreational and industrial environment;

—NIDCD should expand the training of basic scientists in molecular biology, immunology, neurochemistry, protein structure and cellular biology as they relate to the disorders of human communication;

—The Committee directs NIDCD to continue and intensify the study of pathophysiology of common vestibular (balance) disorders;

—Research should continue to determine the effectiveness and potential side effects of cochlear implants and auditory brain stem implants (used in situations where the cochlear implant would be useless.);

—The Committee encourages NIDCD to continue studies in the regeneration of neural tissue after injury. Nasal neuroepithelium has the ability to regenerate; therefore, further studies in this area have the potential of making great progress in the repair and regeneration of the nervous system;

—The Committee recognizes the need for clinical research trials in otitis media and the continuation in studies for developing vaccines to prevent diseases which cause hearing loss;

—Due to the rapid growth of our aging population, communication disorders (which affect 48 million Americans) are reaching epidemic proportions in the United States. In order to find preventions, causes, and cures for these disorders, and to secure our competitive position in the worldwide scientific community the Committee strongly recommends focusing concentrated attention on these problems, and urges that we designate this Institute as one of our highest health priorities.

Early identification of hearing loss

The Committee places a very high priority on the identification of hearing loss in the first few months of life. This period is critical to the development of language in young children. Over the next year, the Institute plans to support up to three cooperative agreements in an effort to identify the most effective means of early infant assessment for hearing loss.

Women and minority working groups

The NIDCD supports the need for more research into the special health issues affecting women and identifying additional opportunities to provide research training for women. An NIDCD working group will focus on identifying specific research needs of women within the communication sciences and development of a strategy for encouraging the training of women scientists. Another group will work to identify specific communication disorders affecting minorities and to identify new training opportunities for minority scientists. Minority supplements to research project grants have been successful mechanisms for training minority scientists through the NIDCD in the past and will continue to receive support.

Disease prevention and health promotion

Studies supported by the NIDCD of the effects of all types of pollution on the ear and upper alimentary and respiratory systems will continue. An Institute-sponsored conference will generate a monograph which will serve as the foundation for a live interactive satellite teleconference to sites around the country with scientific group leaders. A videotape of the teleconference and a leader workbook will be available through the NIDCD clearinghouse, as will a public information videotape on the effects of all types of pollution.

Brain and behavior research

The Committee commends NIDCD's support for basic research in the area of psycholinguistics. The study of the cognitive mechanisms of language has important implications for the recovery of aphasic individuals who are suffering impaired language comprehension or use due to stroke, traumatic head injuries, brain lesions, or brain damage. The Committee also encourages NIDCD to expand support for the development of behavioral models that among other things will increase understanding of the underlying neural mechanisms for receiving and interpreting speech.

Molecular genetics key to understanding deafness that is hereditary

Research in molecular genetics is the key to finding the genes that cause hereditary deafness. Important progress on Waardenburg syndrome and Usher syndrome, two of the more than 50 causes of deafness that is hereditary has been made. Gene therapy becomes a hoped-for and promising tool in treatment of hereditary communication disorders.

Management of neurogenic voice, speech, and language disorders

Language disorders such as aphasia, a devastating disorder, need further investigation as recent treatments have proved promising in initial studies. Greater resources must be committed to expanding this work as well as advancing progress in managing neurogenic speech disorders such as dysarthria, a muscle control difficulty that hinders the ability of an individual to speak clearly, and apraxia, a loss of the ability to carry out purposeful communication.

NATIONAL CENTER FOR RESEARCH RESOURCES

Appropriations, 1991	$335,255,000
Budget estimate, 1992	320,975,000
House allowance	309,200,000
Committee recommendation	317,227,000

The Committee recommends an appropriation of $317,227,000 for the National Center for Research Resources [NCRR]. This is $3,748,000 less than the administration request, $18,028,000 less than the comparable 1991 appropriation of $335,255,000, and $8,027,000 more than the House allowance.

The NCRR administers seven programs that provide much of the infrastructure support to facilitate the conduct of research funded by the NIH and other Public Health Service agencies. The Center fills a variety of research needs, including development of infrastructure for minority institutions, animals and nonanimal model systems, and highly sophisticated instrumentation. The NCRR supports the largest national collection of resources specifically identified for use in biomedical research.

The Committee is encouraged by efforts to expand the capability and use of existing high-performance computing resources for the extramural research community. Sufficient funds have been provided to continue this important initiative.

Clinical research

This program supports the general clinical research centers [GCRC's], which provide the specialized clinical research infrastructure for all areas of NIH interest and are home to more than 4,500 research studies. Many of the clinical trials supported by the NIH components are conducted at GCRC's. The GCRC's also host the Clinical Associate Physician [CAP] program to provide clinical research training for physicians and dentists. This program was enhanced in 1991 with the initiation of a component targeted especially to minorities. This Minority CAP [MCAP] Program will support 10 clinical research trainees in 1992, double the number supported in 1991.

Biomedical research technology

The Biomedical Research Technology [BRT] Program supports the development of applications of rapidly advancing technologies to biomedical research. These technologies include synchrotron beam lines, magnetic resonance imaging and spectroscopy, and high performance computing, all of which have provided opportunities for greatly expanding our knowledge of structural and molecular biology. The BRT program also develops computer and mathematical models for research. This program maintains national and regional resources whose scientists conduct research, collaborate with colleagues, teach the use of the new technologies, and disseminate the results of the research and technology.

Laboratory animal sciences and primate research

The Laboratory Animal Sciences and Primate Research Program develops and supports animal resources and facilities for biomedical research. One component of this program supports the seven Regional Primate Research Centers, which provide specialized facilities for research in AIDS, infectious diseases, neurology, and other areas of research in human and nonhuman primate diseases. A recent finding at the Centers, that macaque monkeys are susceptible to Simian Immunodeficiency Virus and to one form of the Human Immunodeficiency Virus, will enable researchers to use these animals in the development of AIDS vaccines and therapies. This program also provides for the upgrading of animal facilities at research institutions.

Biomedical research support

The Biomedical Research Support [BRS] Program consists of three components. The Biomedical Research Support Grant [BRSG] Program provides funds on a formula basis to institutions to support biomedical research needs not served by other programs. While no funds have been requested this year for the BRSG, the Committee has provided $15,000,000 to continue the BRSG program. The Committee urges the Director to use her contingency fund and transfer authority to further augment this program.

The Committee recommends targeting more BRSG support to minority schools and other institutions that have less than a demimimus amount in their research base. The Committee is supportive of the Department's ongoing effort to target those institutions that are still building a research infrastructure.

The second BRS component, the shared instrumentation grants [SIG], support the purchase of expensive instrumentation that is shared by groups of NIH and PHS investigators at research institutions. The Minority High School Student Research Apprentice Program, the third BRS subactivity, is a highly successful program that allows minority high school students the opportunity to participate in health research fields in order to stimulate their interest in biomedical research careers. In 1991, the Center initiated a pilot program for training high school science teachers as well, and this program will continue in 1992.

Biological models and materials research

The Biological Models and Materials Research [BMMR] Program develops and supports nonmammalian models and resources such as cell systems, lower organisms, and nonbiological systems critical for the conduct of biomedical research. The Committee is pleased that the BMMR program is supporting a number of projects on development of nonmammalian marine models and urges increased priority to this effort. In addition, the program provides support for marine and other biological resources, such as human tissues, for use by biomedical researchers.

Research centers in minority institutions

The Research Centers in Minority Institutions Program supports the development of the biomedical research infrastructure of predominantly minority institutions granting doctoral degrees in the health professions and health sciences. The research capacity of these institutions is enhanced by expanding staff expertise and technical knowledge and by upgrading the scientific instrumentation and facilities used in biomedical research. These institutions continue to increase their involvement in AIDS research—particularly as it relates to minority populations and the inclusion of minorities in clinical trials—and in the development of infrastructure necessary for participation in the human genome initiative and the research programs of other NIH Institutes. The Committee has included $23,574, 000 for the RCMI program in fiscal year 1992.

Research facilities improvement

The Committee notes that the budget request includes a new proposal to construct research facilities at minority institutions. These funds would be awarded competitively to historically black colleges and universities and other similar institutions. Due to the constraints proposed by the Budget Enforcement Act of 1990, the Committee has been unable to fund this new initiative.

NATIONAL CENTER FOR NURSING RESEARCH

Appropriations, 1991	$39,722,000
Budget estimate, 1992	43,747,000
House allowance	43,143,000
Committee recommendation	45,880,000

The Committee recommends an appropriation of $45,880,000 for the National Center for Nursing Research [NCNR]. This is $2,133,000 more than the administration request, $6,158,000 more than the 1991 appropriation of $39,722,000, and $2,737,000 more than the House Allowance.

NCNR-supported research contributes to the health of all Americans by improving nursing practice through promoting health and preventing disease, understanding and mitigating the effects of acute and chronic illness and disabilities, and improving patient care as well as the environment in which it is delivered. The Committee has provided an increase of $3,000,000 for the programs of the NCNR.

Women's health research

The Committee is pleased that the NCNR has emphasized women's health issues, and has had the opportunity to build a solid base of behavioral and physiological research in women's health and to enhance its collaborative efforts with other components of the NIH on selected women's health topics. Part of this ongoing effort includes a specialized research center studying women's health concerns across the life span, with studies underway to emphasize midlife issues such as changes in sleep patterns and gastrointestinal functioning, menopausal symptoms, joint and muscle pain, as well as symptoms and problems secondary to osteoporosis, heart disease, and breast and lung cancer. Studies addressing the vulnerability of ethnic minority women to high blood pressure, stokes, and AIDS will also be initiated.

Health promotion among children and adolescents

The Committee urges continued priority be given to health promotion among children and adolescents. Of the 10 leading causes of death in the United States, each is in part behaviorally determined. Children and adolescents within our society are of special concern, because this period of life is critical in the development of health compromising and health promoting behaviors. To address this problem, the NCNR established an exploratory research center to investigate health behavior development in children and adolescents. This new center, along with other ongoing projects will focus on development and testing of health-enhancing models of behavior. The basic knowledge gained from these studies will lay the foundation for the primary prevention of disease and the promotion and maintenance of healthy lifestyles across the life span.

Rural health care

Funding is provided to address the special health care needs of individuals residing in rural areas. Specifically, the health status of individuals, their health-care requirements, and the most effective methods of delivering health care to them are being addressed. The Committee is pleased that the NCNR has expanded this initiative to vulnerable populations, particularly those at risk for chronic illness and disabilities, and those requiring increased primary care to achieve wellness.

Long-term care requirements of older persons

The proportion of the population aged 65 years and over is increasing rapidly, and the NCNR has targeted the members of this age group in its initiative on long-term care requirements of older persons. Studies will be undertaken to determine the best modes of intervention to provide community-based care for older persons that focus on maintaining health, including functional ability and emotional well-being; preventing the impact of chronic illness and disabilities; preventing physical frailty; and maintaining quality of life.

Vulnerable populations

The Committee is pleased that progress has been made in encouraging research that targets the health care concerns of rural Americans, especially vulnerable populations such as native Hawaiians, minority pregnant women and their infants. The Committee was very pleased to recently learn that the NCNR has established a special native American nursing task force in order to ensure that continued attention is given to their truly pressing health care needs.

HIV infection

The Committee is pleased that NCNR is funding several projects focusing on the prevention and care of HIV infection. Topics include the physiological and psychological factors in HIV-positive individuals and their caretakers; optimum modalities of nursing care for hospitalized patients; evaluation of patient care needs during the course of practicing high-risk behaviors. The efforts to work with other agencies in encouraging international behavioral research in support of AIDS prevention are to be particularly applauded. The intramural program shows significant promise in increasing our understanding of symptoms related to HIV infection, such as nutritional problems that may be related to treatments and immune function. The Committee is encouraged to learn that new studies will measure health-related quality of life, using subjects participating in ongoing clinical trials. The Committee further recommends that NCNR make special effort to involve other disciplines, such as psychology, in these research endeavors.

NATIONAL CENTER FOR HUMAN GENOME RESEARCH

Appropriations, 1991	$87,418,000
Budget estimate, 1992	110,487,000
House allowance	93,115,000
Committee recommendation	109,309,000

The Committee recommends an appropriation of $109,309,000 for the National Center for Human Genome Research [NCHGR]. This is $1,178,000 less than the administration request, $21,891,000 more than the 1991 appropriation of $87,418,000, and $16,194,000 more than the House allowance.

The NCHGR is responsible for coordinating and supporting research and research training in genomic analysis, and the study of the ethical, legal and social implications of human genome research.

Accelerating the project

The Committee believes that the HGP will bring untold health benefits to humankind but is not satisfied that NIH and NCHGR has fully explored ways of accelerating the project. To achieve this objective the cost of DNA sequencing must be substantially reduced and secondly the rate at which DNA sequencing can be done must be increased. The Committee has included an increase of $2,000,000 to more fully focus on these two vital steps to reduce the overall time that the project will take. The Committee requests a report by the end of January on the efforts to meet this objective and prospects for doing so.

Human genome project [HGP]

The HGP is an international research effort designed to map and sequence the entire human genome in a systematic and cost-effective way, rather than continuing the current approach of mapping and sequencing one gene at a time at a slower pace and at greater cost. The development of chromosomal maps is expected to be largely completed in the first 5 years as well as marked improvements in the technology for DNA sequencing. As the NIH component of the HGP, the NCHGR coordinates its activities with those of other Federal agencies and other countries participating in this endeavor.

Multidisciplinary centers

Human genome research centers provide a multidisciplinary approach toward reaching one or more of the goals of the HGP. Current research efforts within the centers focus on integrated physical and genetic linkage maps for specific human chromosomes; development of new technology for locating and analyzing genes associated with human diseases; and the physical and genetic map of the mouse genome. Each human genome research center emphasizes technology development and outreach through the sharing of information and techniques developed within the center with the scientific community.

Technology development

Creative and novel approaches in all areas are essential to the success of the HGP. The NCHGR will continue to stimulate new ideas and approaches through investigator-initiated research projects and exploratory/developmental grants. For example, several projects are underway to develop new technology or to scale up existing technologies to find more efficient ways to do large-scale DNA sequencing. In the course of technology development, the DNA of highly interesting regions of human DNA or the complete DNA of important model organisms will be sequenced, so that results will be of maximum usefulness to the scientific community. Current estimates are that DNA sequencing costs between $2 and $5 per base pair and these projects are attempting to bring that cost down to $0.50 per base pair at the end of 5 years.

Framework linkage maps

One of the highest priorities for the NCHGR will be the rapid completion of a framework linkage map of all human chromosomes. This map, consisting of approximately 300 evenly spaced, easy to use markers across the entire human genome, will likely be the first research tool provided to the research community from the human genome project [HGP]. Upon completion, this map will then be further refined to add more markers and finish the high resolution linkage map as outlined in the 5-year plan for the human genome project.

Ethical, legal and social implications

The study and analysis of the social and ethical issues surrounding genome research is an integral part of the HGP. The first three major issues to be studied are: privacy of genetic information; safety and efficacy of new genetic tests; and fairness in the use of genetic information. In order to determine the best ways of approaching carrier testing for cystic fibrosis, the NCHGR is supporting pilot projects designed to assess the introduction of genetic tests in the medical community. The results of this study can then be used as a model by the scientific community in testing for other disease genes.

JOHN E. FOGARTY INTERNATIONAL CENTER FOR ADVANCED STUDY IN THE HEALTH SCIENCES

Appropriations, 1991	$17,519,000
Budget estimate, 1992	19,922,000
House allowance	19,922,000
Committee recommendation	19,922,000

The Committee recommends an appropriation of $19,922,000 for the Fogarty International Center [FIC]. This is the same as the administration request, $2,403,000 more than the 1991 appropriation of $17,519,000, and the same as the House allowance.

The Fogarty International Center [FIC] promotes scientific research by facilitating the assembly of scientists in biomedical, behavioral, and related fields; fostering international scientific cooperation through its research programs; providing research and research training awards for foreign scientists to conduct research in the United States and for American scientists to conduct research in other countries; coordinating NIH international research activities; and serving as a focal point for foreign scientists and visitors at the NIH.

Regional initiatives

Committee funding permits continued support of cooperation between American scientists, and scientists from Central and Eastern Europe, and Latin America and the Caribbean, in collaborative biomedical research efforts. An example is the collaboration between one of NIH's Nobel Laureates and a Czechoslovak scientist on an outbreak of a neurological disease in Czechoslovakia. Work is continuing on an epidemic of spongiform encephalopathy in Czechoslovakia and its relationship to similar neurological diseases in the United Sates.

International AIDS research

FIC's AIDS programs are designed to increase trained science manpower internationally to help solve the AIDS crisis, by supporting research and training in the epidemiology, diagnosis, prevention, and treatment of AIDS worldwide. Currently, through awards made to U.S. universities, several hundred scientists from developing countries—including those in Africa, Asia, and Latin America where the disease is rampant—have benefited from this training. Collaborative efforts are now underway with these scientists and U.S. scientists to devise new methods of prevention, including an important study in Africa on the prevention of tuberculosis in children with AIDS. Efforts are also underway to assemble the expertise and resources needed to conduct clinical trials on vaccines and new drugs in these regional populations.

The Committee was interested to learn that the FIC International AIDS Research and Training Program can now be used to rapidly respond to emerging international disease threats, and could serve as a model for future efforts to meet global research challenges that may arise from emerging microbes, global climate change, environmental pollution, and other disease perils.

International research awards program

Funding is included to support biomedical research conducted by foreign scientists in the United States and by U.S. scientists in other countries. A recent research advance has been made in the area of diabetes, with an emphasis on proper insulin therapy, not just to regulate sugar metabolism, but also to maintain the appropriate level of this essential protein in the blood. Such information will be useful in the treatment of diabetic patients with insulin.

International advanced studies program

Through this program, distinguished scientists are supported at the NIH to conduct pioneering research on preventing and treating diseases found worldwide. Current efforts include research on the effects of retinoid drugs in cell growth that shows promise for the development of new therapies for cancer treatment.

NATIONAL LIBRARY OF MEDICINE

Appropriations, 1991	$91,408,000
Budget estimate, 1992	100,554,000
House allowance	99,565,000
Committee recommendation	100,549,000

The Committee recommends an appropriation of $100,549,000 for the National Library of Medicine [NLM]. This is $5,000 less than the administration request, $9,141,000 more than the 1991 appropriation of $99,408,000, and $984,000 more than the House allowance.

NLM's mission is to provide American health professionals with the sophisticated information services they need to treat patients and conduct research. NLM's varied programs serve to combine the basic library function of acquiring the world's biomedical literature with the capability of modern computer and communications technologies to ensure the rapid and wide availability of medical information.

Outreach

NLM supports a variety of outreach activities designed to increase the use of its systems by individual health professionals, especially those presently unaffiliated with an institution and/or those who are located in rural or other medically underserved settings. The populations in many of these locations are predominantly minority. The National Network of Libraries of Medicine has been expanded with an increased emphasis on outreach activities. NLM's grant programs are also being oriented toward outreach through grants to hospital libraries, academic health centers, and for medical informatics training. Training programs directed at historically black colleges and universities have also been initiated. NLM's success in publicizing its services is evidenced by more than 30,000 copies sold of the user-friendly software, Grateful Med, that provides access to Medline. A new enhancement of Grateful Med, "Loansome Doc," will greatly increase access to information by rural and other isolated health professionals. "Loansome Doc" allows them to use their microcomputers to request documents identified during online searching. The Committee has added $1,000,000 to expand the rural outreach program.

High performance computing and communications

NLM has taken a leadership role for medicine in the multiagency high performance computing and communications [HPCC] initiative. NLM's primary responsibility will be the development of practical medical applications that make use of the accelerating advances in computer technology. Highlights of NLM's involvement include: (1) a program to assist medical centers to become part of the new National Research and Education Network; (2) efforts to provide U.S. researchers, including those involved in the human genome project, with sophisticated access to molecular biology databases; (3) sponsorship of a multiuniversity program to create a unifying medical language system that will facilitate access to biomedical knowledge sources; and (4) development of a national program to advance millimeter-level digital representation of human anatomy for sophisticated computer representation and display.

Cost recovery

Last year the Committee endorsed NLM's policy to create and maintain the MEDLARS data bases using appropriated funds and to recover full costs of access through user fees. The Committee supports the continuation of these operating policies both as a principle of cost-sharing and as a process for maintaining the integrity of the data bases.

National Center for Biotechnology Information

The Center continues to improve access to biotechnology data bases. The development of the GenInfo Backbone, a data base that includes Medline records and DNA and protein sequence information, will serve as a foundation for linking an increasing number of biology data bases; thereby improving access to the information by health professionals.

OFFICE OF THE DIRECTOR

Appropriations, 1991	$97,651,000
Budget estimate, 1992	95,176,000
House allowance	149,176,000
Committee recommendation	133,724,000

The Committee recommends an appropriation of $133,724,000 for the Office of the Director [OD]. This is $38,548,000 more than the administration request, $36,073,000 more than the 1991 appropriation of $97,651,000, and $15,452,000 less than the House allowance.

The OD provides support for the central administration and services to the NIH Institutes, Centers and Divisions. The OD is responsible for the overall direction and coordination of intramural and extramural research and research training policy, the review of program quality and effectiveness, the coordination of selected NIH-wide program activities, and the administration of centralized support activities essential to operations of the NIH.

Indirect costs

The Committee is concerned that the administration proposed indirect costs reforms are inadquate to address the serious abuses that have been documented by the General Accounting Office, the inspector general, and oversight committees of the Congress.

Accordingly, the Committee directs the inspector general at the Department of Health and Human Services to conduct a series of audits to insure that the reform package proposed by the administration is having the intended effect. These audits should be ongoing throughout the year, but the Committee requests biannual reports on the status and progress being made. Additionally, the Committee directs the inspector general to fully examine the consequences and desirability of further reductions in the proposed indirect cost cap. This additional requirement should include an investigation of the need to cap the remaining four categories of indirect cost.

The Committee is concerned that the average indirect cost between 1966 when we first adopted the system of negotiated indirect cost has increased from an average of 20 percent to an average of 54 percent. The Committee directs that the inspector general examine the weaknesses in the current negotiated process that have permitted this continuing escalation of the average rate and to recommend the changes needed in the system to better protect the public's money. The Committee requests that the inspector general also examine the differences that exist in the treatment by the various cognizant agencies in the negotiating process and identify the reasons for different treatment of these matters by the various cognizant agencies.

The Committee is aware that prior to 1966 the NIH and all other Federal agencies had fixed indirect cost rates that were not negotiated. These rates ranged from 8 percent to 20 percent. The Committee further directs the inspector general to examine whether returning to the system that existed prior to 1966 would be more cost effective. The Committee requests an analysis of the savings that would result from various levels of governmentwide caps returning to the 8 percent cap that existed in 1956 and for various higher levels.

During the Committee's regular hearings on the President's budget for fiscal year 1992, testimony was received concerning the tremendous opportunities for advances in the fields of the biomedical sciences. In order to take advantage of these opportunities, the Committee believes it essential that funds appropriated to support research be used to their maximum potential. Therefore, the Committee requests that the inspector general also examine whether the current funding methods for research grants fosters, or inhibits, the leveraging of non-Federal resources.

Office of Research on Women's Health

The Office of Research on Women's Health develops NIH policy to ensure that research pertinent to women's health is identified and addressed through research activities supported by NIH. In fiscal year 1992 the OD will initiate a grant program to support research on health issues of concern to women. Current efforts include the organization of a workshop that will bring together scientists, clinicians, and representatives of women's health organizations to develop a trans-NIH agenda for women's health research for the 1990's including the development of a strategic plan for rehabilitative research.

Cancer, cardiovascular disease, and osteoporosis are three of the leading causes of death and disability among America's women. Although distinctly different problems these diseases are now linked through potential preventive regimens. While menopause and reduced ovarian function are increasingly believed to play a significant role in the etiology of these diseases, diet modification along with a number of dietary supplements hormone replacement therapy, and exercise, as well as cessation of smoking offer hope for reducing the toll of these diseases. Such regimens however may not be reinforcing and may even work at cross purposes to one another.

A major study is needed to address each of these regimens the full range of impacts that each may have, and the effects of such preventive regimens in combination. Such a study clearly transcends the categorical structure of the National Institutes of Health [NIH]. In addition the findings must lead to recommendations which are couched in practical terms and are generalizable to all the Nation's women, including all racial and socioeconomic groups. Research and development of preventive strategies must consider risks as well as benefits of any specific therapy in an effort to address the whole person.

The National Institutes of Health proposes to address these issues by a study of the effects on disease risk of: changes in diet and exercise patterns, the use of hormones, and smoking cessation. This study will be coordinated by the NIH Office of Research on Women's Health and conducted by the research institutes and centers. The various components of the study will be performed by scientists in medical schools, universities and other components of the extramural community. Thus, the study will have an ecumenical approach—one that allows all of the categorical Institutes to contribute their knowledge, expertise, and wisdom to a coordinated research program.

The study will have three components, including a large prospective surveillance program, a nationally based community prevention and intervention study, as well as randomized clinical trials. This study will be the largest of its kind ever to take place in the United States, and thus will require careful planning and design over the next 6 to 9 months by scientific experts representing each of the NIH units named above. The Committee has included $20,000,000 to begin this initiative as well as other priorities such as the effects of oral contraceptives on breast cancer, fibroid tumors, and endometriosis. The Committee has also increased funding for the Office by $5,000,000 above the regulated level of $2,500,000. Not only is this funding intended for office operations, but for additional research on important issues of women's health.

The Committee is extremely concerned that the NIH has not contracted with the Institute of Medicine to conduct a study focusing on women's health research and strongly urges the NIH to comply with this request. As cited in last year's report, this study reviews NIH funding of research in areas of women's health, resource allocation to women's health, and barriers to this research. The study also includes review of nongovernmental support for women's research, as well as recommendations on how women's health issues may be better addressed by the NIH and the U.S. Public Health Service. As clarified in the chairman's letter to Acting Director Raub earlier this year, the Committee expects the NIH to complete this contract. Further, the Committee requests notification by July 31, 1991, that the contract has been completed.

Additionally, the Committee is concerned, however, that the health women's trial not supplant other important studies and research on women that needs to be done. The General Accounting Office reported to Congress that the lack of attention to women's health issues rested not simply with the fact that specific research on women was not being accomplished, but that too little attention was being focused on studying gender difference across the board.

The Committee requests a report from the Director of NIH as to the timing and implementation of this large-scale, multicenter trial.

Further, the Committee directs the NIH to consider the role of diet in the prevention of cancer and coronary heart disease. This study should evaluate whether or not a simple dietary intervention, emphasizing total fat reduction, will prevent disease among postmenopausal women. The Committee requests a report from the Director of NIH regarding the timing and implementation of this study and how it will be accomplished by October 30, 1991.

Director's discretionary funding authority

The Committee has provided the $20,000,000, as requested, for the Director's discretionary fund and the 1-percent transfer authority that has been provided to the Director in the past. The Committee has favorably reviewed a recent report entitled, "A National Institutes of Health Plan to Strengthen the Competitiveness of Selected States for Research Funding," which proposes a program to enhance the competitiveness of academic investigators in the lower rank of States through the NIH peer review system and to increase the probability of long-term growth of NIH competitive funding of investigators in those States. The Committee urges the Director to use her discretionary funds to initiate a NIH–CPSCOR program at the level of $2,000,000. The Committee expects this program to be managed by the National Center for Research Resources [NCRR]. The Committee directs that all States designated by the EPSCoR program in the National Science Foundation be included in the NIH program, with the Director having discretion to include other States. In addition, because the State based improvement mechanism is viewed as essential, the Committee directs that all planning proposals and institutional development award applications be submitted by State based EPSCoR committees. The Director is encouraged to consult with the Director of the NSF to assure coordination of the overall program on a statewide basis. The NCRR is urged to expedite the planning phase, so that the full program may begin early in the next fiscal year. Additionally, consideration should be given to enhancing the Biomedical Research Support Grant Program and the shared institutional grant programs which have been funded, but at levels below those provided in fiscal year 1991.

Office of Minority Programs

The Office of Minority Programs [OMP] develops NIH-wide goals for minority research and training, directs and coordinates these programs and administers grant awards that increase minority participation in research. To increase funding and resources devoted to minority health, OMP is in the process of implementing the following: developing a 4-year plan to increase support for minority health and training, establishing an NIH Minority Program Advisory Board, supporting pilot projects to develop new approaches to recruiting and retaining minority students and supporting demonstration projects to improve the health of targeted minority populations.

Extramural facilities

The Committee has included $10,000,000 for extramural construction to be awarded competitively. The Committee notes that there are about 1.2 million intraocular lens implants each year in the United States. The advances in this technology hold the promise of a safer and more effective treatment of blindness and visual loss from cataracts currently the second leading cause of blindness in the United States. Therefore, recognizing the leadership role of the Storm Eye Institute at the Medical University of South Carolina in this area, the Committee believes the construction of an intraocular lens research facility would be a very competitive use of these funds. The Committee also commends the proposed Biomedical Research Facility at the Medical College of Georgia [MCG]. The MCG has contributed significantly to the quality of health care in Georgia and has served the Nation through its significant medical research program.

Additionally, the Committee believes that support for construction of critically needed bone marrow transplant programs in major metropolitan areas which do not now have such units (such as south Florida) should be a priority use of these funds. The Committee notes that south Florida is the largest metropolitan area in the Nation without a bone marrow transplantation program. Additionally, research at the University of Oklahoma has increased fivefold in the past decade and utilization of research space has doubled in the past 3 years.

Unconventional medical practices

The Committee is not satisfied that the conventional medical community as symbolized by NIH has fully explored the potential that exists in unconventional medical practices. Many routine and effective medical procedures now considered commonplace were once considered unconventional and counter indicated. Cancer radiation therapy is such a procedure that is now commonplace but once was considered to be quackery. In order to more adequately explore these unconventional medical practices the Committee requests that NIH establish within the Office of the Director an office to fully investigate and validate these practices. The Committee further directs that the NIH convene and establish an advisory panel to screen and select the procedures for investigation and to recommend a research program to fully test the most promising unconventional medical practices. The Committee has added $2,000,000 for this purpose and asks for a report by the end of January 1992 on progress made to establish this office.

Math and science education

The Committee is pleased to learn that NIH has initiated a plan to focus on the recruitment of under represented populations into biomedical science careers and the stimulation of the interest of young students in math and science. The Committee feels this initiative is of vital importance to the Nation and has included an increase of $2,500,000 for the expansion of the program.

NIH Foundation for Biomedical Research

The National Foundation for Biomedical Research was created by Public Law 101–613 on November 16, 1990. The Foundation will draw private funds into the NIH to support endowed chairs for 10 to 12 senior biomedical investigators at the Nobel laureate level and make possible a smaller program for visiting scientists in mid-career. The Committee has included $200,000 for the establishment of the Foundation.

AIDS

The Committee commends the recent efforts by the National Academy of Sciences Institute of Medicine to study the NIH AIDS program and recommend improvements. A major recommendation of this study was that the NIH develop a 5-year plan to identify HIV-related research needs and opportunities, set priorities, assess program balance, identify gaps in the NIH program, allocate resources, and evaluate progress. The Committee requests the Director of NIH to undertake such an effort immediately, and submit a plan to the Committee within the year.

In a related recommendation, the IOM report supported expansion of the NIH Director's Office of AIDS Research. This Office requires several senior-level scientists and necessary support staff to assist the Associate Director for AIDS Research in monitoring the AIDS research efforts of all NIH institutes, assessing progress, and identifying gaps in those efforts. The Committee recommends that the Director of NIH begin staffing this Office to perform these functions.

Nitric oxide

The Committee is aware of the recent discoveries indicating the important role of nitric oxide as a signal in cell communication. This new knowledge has broad implications for understanding and treating a variety of disorders involving the heart, blood pressure, digestion, the immune system, and brain function. The Committee urges the appropriate Institutes of NIH to help further advance our understanding of nitric oxide and its application to the prevention and treatment of disease and the promotion of health.

Health and behavior

For the past several years, this Committee has emphasized its interest in health and behavior research. Better information about why people make the health choices they make, and what can encourage people to choose healthier lifestyles, is essential if our Nation is to meet our year 2000 health objectives. The Committee has asked the Director of NIH to present a long-term plan to increase the amount of health and behavior research projects throughout NIH, but such a plan has not yet been presented to Congress.

This Committee had hoped to hear from the NIH leadership itself about plans to increase the amount of research on health and behavior, including research on prevention of diseases such as AIDS, heart disease, lung cancer, and osteoporosis. the Committee is especially concerned that research be increased on health promotion interventions in special populations: adolescents, ethnic minorities, the disabled, women, and the oldest old. This research will help point the way to healthier lifestyles for all Americans, and will ultimately save health care dollars.

In 1990, Congress received an interim report from the NIH working group on health and behavior, reporting that according to its recent calculations, approximately 4.3 percent of the NIH budget was spent on health and behavior research at the various Institutes in fiscal year 1989. The Committee has learned that the percentage dedicated to this important research is actually going down. The administration's fiscal year 1992 budget request for health and behavior research is less than 4.1 percent of the budget. The NIH is directed to redouble the efforts to increase the percentage of funds it spends on health and behavior research within the next 3 years, and to report to this Committee by March 30, 1992, on the ways in which it will reach that target, classifying research using the same principles employed in the 1990 report.

AIDS program

The Committee commends the recent efforts by the National Academy of Science Institute of Medicine to study the NIH AIDS program and recommend improvements. A major recommendation of this study was that the NIH develop a 5-year plan to identify HIV-related research needs and opportunities, set priorities, identify gaps in the NIH program, allocate resources, and evaluate progress. The Committee directs the Director of NIH to undertake such an effort immediately, and submit a plan to the Committee within 1 year.

Representation on advisory boards and commissions

The Committee is concerned that the membership of advisory boards and commissions within the Department of Health and Human Services and among other related Federal agencies, does not include broad representation of certain health care providers, including chiropractors. The Committee, therefore, directs the Department and other related agencies covered by this Appropriations Act to include a significantly larger number of chiropractors and other health care providers on all current and future advisory boards, commissions, and peer review panels. The Committee expects to receive periodic reports during the course of fiscal year 1992 regarding the implementation of this directive.

National Commission on Sleep Disorders Research

The Committee has closely monitored the progress and activities of the National Commission on Sleep Disorders Research during their development of its long-range plan. The Committee looks forward to reviewing the Commission's final report and plans to seriously consider its recommendations.

Diagnostic radiology

The field of diagnostic radiology has played a significant role in the medical advances made over the past several decades. Medical imaging procedures, in fact, now contribute to the final patient diagnosis in more than 75 percent of all hospital admissions. Given the potential this field holds to more accurately and safely diagnose disease through noninvasive procedures, the Committee has called for the establishment of an intramural diagnostic radiology laboratory at NIH. The Committee is pleased to learned that such a laboratory will be fully operational within the next few months. With the establishment of the intramural program, the Committee now expects NIH to move forward with an extramural grant program in this field in order to build upon the strengths of diagnostic radiology departments in academic research centers. The Committee expects that the appropriations committees will receive a report on the status of the intramural program prior to next year's hearings.

Osteoporosis

Osteoporosis is a debilitating degenerative bone disorder affecting over 25 million Americans, particularly affecting women—50 percent of whom are over the age of 75. This is a silent disease with no symptoms until actual fractures occur, resulting in great pain and suffering, and further resulting in extensive hospital and rehabilitation costs amounting to over $10,000,000,000 annually.

A disease that quietly affects so many people is important to research not only from a biological standpoint, but also from a cost perspective. As a result, the Committee directs the NIH, in coordination with the Agency for Health Care Policy and Research, to conduct research related to identifying and evaluating cost-effective strategies for prevention, diagnosis, and treatment of osteoporosis and related bone disorders.

It is essential for the NIH to conduct additional research in this area out of the funds provided. Further, the Committee requests that a report be given to the Committee prior to the fiscal 1993 hearings breaking out efforts to date by various institutes and future plans for initiatives.

Nutrition research

The report of the Public Health Service "Healthy People 2000," stresses the importance of nutrition in preventing disease. It is well known that proper diet and nutrition can assist in reducing the occurrence of diabetes, heart disease, hypertension, and forms of cancer. Nutrition is also a prominent factor in the development of children and the prevention of disabling disease among children and women. Nutritional care is also an essential component of trauma care. NIH as a whole must play a leading role in developing the scientific basis for improved information on nutrition and improved nutritional care. These efforts can assist dramatically in reducing the costs of care and other financial assistance to those with disease and disability. Numerous Institutes have a role in this effort including NIDDK, NCI, NHLBI, NICHHD, and NIA and the Office of Women's Health. The Committee urges each of these Institutes and agencies to develop initiatives in the nutrition area including both basic and clinical research and clinical research units.

BUILDINGS AND FACILITIES

Appropriations, 1991	$168,687,000
Budget estimate, 1992	104,125,000
House allowance	108,625,000
Committee recommendation	102,885,000

The Committee recommends an appropriation of $102,885,000 for Buildings and Facilities [B&F]. This is $65,802,000 less than the administration request, $1,240,000 less than the 1991 appropriation of $168,687,000, and $5,740,000 less than the House allowance.

The buildings and facilities appropriation provides for the NIH construction programs including design, construction, and repair and improvement of the clinical and laboratory buildings and supporting facilities necessary to the mission of the NIH. This program maintains physical plants at Bethesda, Poolesville, Baltimore, and Frederick, MD; Research Triangle Park, NC; Hamilton, MT; Perrine, FL; New Iberia, LA; Sabana Seca, PR; and other NIH field locations.

Construction programs

A project for which second-year funding is provided is the modernization and improvement of the NIH infrastructure, a majority of which is nearing 40 years old. Funds have been included for the continuation of the safety and health improvements for the NIH Clinical Center, renovation and construction of animal facilities, rehabilitation of our oldest laboratory buildings, the initial concept development and design of the clinical center infrastructure modernization and improvement program, construction of a waste handling facility in North Carolina, and the completion of the nonhuman primate facility for AIDS research. The NIH is supporting several ongoing projects, including the design and initial construction of the consolidated office building, the construction of the Child Health and Neurosciences Facilities Program, and the design of replacement facilities at the NIEHS in North Carolina.

Repairs and improvements

Funds have been provided for the continuing program of repairs and improvements to NIH buildings and facilities that house research and administrative activities. This program supports repairs and alterations required as the result of constant use, exposure to the elements, changes in space utilization, and changing environmental and code requirements.

Property acquisition

The Committee is aware that 1.55 acres of the Wilson estate is available for sale to the NIH. The Committee has amended the appropriation language to permit the acquisition of such real property.

Since 1935, the Wilson family has donated in excess of 93 acres, including the Wilson residence, to the Federal Government for the use of the NIH. Recently, Michael and Derek Wilson have expressed an intent to fulfill the wishes of their mother, Mrs. Ruth F. Wilson, as expressed in her will, to donate the family residence and the immediate surrounding area to the NIH. In addition to that do-nation, they propose to sell the remaining 1.55 acres to the NIH. The acquisition of this property would provide a unique opportunity for the NIH to acquire the last remaining parcel of land within the NIH enclave that is not Federal property.

The Committee understands that the average of the appraisals of the property to be purchased is approximately $800,000. The NIH should submit a formal reprogramming request that would identify the source of funds.

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

Appropriations, 1991	$2,928,404,000
Budget estimate, 1992	3,048,328,000
House allowance	2,917,742,000
Committee recommendation	3,118,832,000

The Committee recommends an appropriation of $3,118,832,000 for alcohol, drug abuse, and mental health activities. This amount is $201,090,000 above the House allowance, $70,504,000 more than the administration request, and $178,717,000 more than the fiscal year 1991 amount.

The Alcohol, Drug Abuse, and Mental Health Administration [ADAMHA] supports research and treatment of alcoholism, drug abuse, and mental disorders. ADAMHA maintains intramural research facilities and awards project grants and contracts for research, training, demonstration, and prevention programs. ADAMHA also provides grants to States and communities for alcohol, drug abuse, and mental health programs.

The agency is comprised of three Institutes, the National Institute of Mental Health [NIMH], the National Institute on Drug Abuse [NIDA], and the National Institute on Alcohol Abuse and Alcoholism [NIAAA]; and the Offices of Substance Abuse Prevention [OSAP], and Treatment Improvement [OTI].

NATIONAL INSTITUTE OF MENTAL HEALTH

Research

The Committee recommends $520,793,000 for mental health research, including research training and instrumentation grants. This is $774,000 above the House allowance, the same as the administration request, and $37,028,000 over the fiscal year 1991 appropriation.

Severe mental disorders.—The Committee is encouraged by the remarkable recent progress the understanding the mechanisms that disrupt normal brain functions to produce mental disorders. It is particularly appropriate during this decade of the brain that we recognize the potential of neuroscience and technology to increase our understanding of and provide new hope for conquering mental illness.

In the pursuit of this goal, the Committee encourages NIMH to continue its efforts to fully implement the four major plans that constitute a strategic research attack on all forms of mental illness and the tragic stigma that traumatizes its victims. The Committee especially applauds the newest plan, "Caring for People with Severe Mental Disorders: A National Plan of Research to Improve Services," which provides a broad outline of research to find the best, most efficient way to provide treatment and services to the severely mentally ill. The Committee fully supports efforts to translate the benefits of neuroscience research into better services for the mentally ill.

For example, the Committee is aware of a growing problem with incarceration of the mentally ill. It is estimated that as many as 25 percent of mentally ill or mentally retarded Americans enter the penal system eventually, sometimes repeatedly. For example, the Los Angeles County jail houses approximately 3,600 seriously mentally ill individuals on any given day, 700 more than the largest public mental hospital in the United States. This is deeply disturbing. The Committee encourages NIMH to address this and other issues affecting the severely mentally ill, with emphasis on finding more effective methods to screen, refer, or treat these individuals who enter the correctional system, including providing alternatives to incarceration.

The Committee notes with distress the passing of the Honorable Silvio Conte, a champion for the severely mentally ill. The Committee suggests that NIMH dedicate its centers for neuroscience research and centers for the neuroscience of mental disorders to the memory of the late Representative. The Committee is supportive of new research in neuroimaging using superconducting quantum interference devices [SQUID] to study neuroactivity in real time. The Committee encourages NIMH to fund approved research proposals using SQUID.

The Committee appreciates the ongoing work of the National Advisory Mental Health Council and the National Mental Health Leadership Forum. The Committee requests that reports of these groups be transmitted to the Committee, as authorized under section 406(g) of the Public Health Service Act.

Rural and native American mental health.—The Committee has set aside $25,000,000 over the past 2 fiscal years for research and demonstration projects focused on the special problems unique to those living in rural areas, and among native Americans. In doing so, the Committee has provided ADAMHA with the means to undertake critical research on these populations. The Committee is encouraged by ADAMHA's research efforts to date. The Committee recommends that ADAMHA devote not less than $15,000,000 in fiscal year 1992 to continue rural and native American mental health research.

Family research.—The Committee notes that the family as an institution has undergone enormous changes over the last decade, and that the shape of the American family continues to shift. As America heads toward the year 2000, the family is being redefined by record levels of divorce, growing numbers of single-parent households, a surge of latch-key children, households where both parents work, rising poverty, teen pregnancy, and abuse of children, spouses, and elders. Yet the family remains the primary influence on individuals of all ages, responsible for preparing the next generation to function effectively in a rapidly changing world.

The Committee believes there is a need for a systematic program of research, applied intervention, and graduate education focused on assisting families to develop and enhance their ability to adapt to societal changes. Because of the complexity of the family structure and the myriad complex problems families face, the Committee believes NIMH must support multidisciplinary research including expertise in education, political science, family and consumer sciences, sociology, psychology, history, health disciplines, philosophy, and others. The Committee has provided $2,750,000 to support this research.

The Committee is concerned that, 2 years after establishing an Office of Rural Mental Health at the Committee's behest, ADAMHA has yet to appoint a permanent director for this office. The Committee encourages ADAMHA to rectify this situation.

Adolescent health.—The Committee is concerned about the high numbers of adolescents suffering from mental health disorders, and the lack of available information on effective strategies for providing services to adolescents. The Committee directs NIMH to fund services research demonstration projects testing innovative, nontraditional methods for integrating mental health services into comprehensive school-linked health centers, as suggested by the OTA report on adolescent health.

Prevention.—The Committee looks forward to receiving the Institute of Medicine report on prevention by February 1992, along with an NIMH plan for implementation of its recommendations. The Committee expects this will be an ongoing initiative with appropriate funding and staff provided.

The Committee urges that NIMH set aside sufficient funds for mechnisms such as FIRST awards, small grants, and other methods to reverse the decline in the number of young NIMH investigators in the behavioral sciences. The Committee requests that NIMH report to the Committee by January, 1, 1992, on its funding of this effort and its progress in this regard.

The Committee has not received a timetable for implementing a behavioral science research centers program, including schedules for announcing, reviewing, and funding such centers. The Committee requests that NIMH provide by January 31, 1992, a status report on the agency's plan for this intitiative.

The Committee is concerned that the ADAMHA AIDS portfolio does not focus research on primary prevention, and encourages NIMH to enhance behavioral science field trials testing community-based prevention efforts. Priority should go to conducting outcome evaluations of AIDS prevention efforts to learn which prevention efforts work with which populations. ADAMHA should coordinate this service-related research with CDC. The Committee directs that ADAMHA contract with the Institute of Medicine, or a similar agency, to undertake a study of the ADAMHA AIDS research and services programs to include but not be limited to assessment of the mission, programs, management, and funding levels.

The Committee was pleased with NIMH's efforts during the past year to work collaboratively with the pediatric-EMS program of HRSA. The Committee has included an additional $750,000 for continued joint efforts in pediatric-EMS.

The Committee commends NIMH for establishing a task force on social work research. The Committee has provided funds to implement its recommendations and to provide increased attention to the training and career development of social work researchers, with emphasis on those from minority (including native American and Hawaiian) backgrounds.

The Committee is concerned about the treatment of victims of head injuries and their families. Clients and patients often are not managed appropriately, thus causing unnecessary disability. The Committee encourages NIMH to develop an agenda addressing the issues of cognition, personality change, behavior, psychosocial adjustment, and the mental health of head injury survivors and their families. The comprehensive agenda should be sensitive to community-based services and to treatments delivered to survivors of head injury who fall into the mental health system.

Clinical training

The Committee recommends $13,670,000 for clinical training. This amount is $5,670,000 more than the House allowance and the same as the fiscal year 1991 amount. The administration requested no funds.

This program provides training to mental health personnel in five core disciplines, requiring a payback for the support of an equal number of years of service to underserved areas and populations. These include the seriously mentally ill, mentally disabled elderly and minorities, and children and adolescents.

The Committee intends these funds to be distributed equitably across the five core mental health professions, and awarded in exchange for a service payback obligation. The Committee urges NIMH to place highest priority under this program on institutional grants for student support, and wishes to express its support for prevention activities and interdisciplinary training programs.

Community support demonstrations

The Committee recommendation includes $25,880,000 for the Community Support Program [CSP]. This amount is $995,000 more than the fiscal year 1991 appropriation and the House allowance, and the same as the administration request.

The Community Support Program and the related Child and Adolescent Service System Program [CASSP] demonstrations seek to determine appropriate alternatives to long-term, inpatient care for chronically mentally ill patients; and to promote service system improvements for severely mentally disturbed children and youth.

Prevention demonstrations

The Committee has provided $6,075,000 for mental health prevention services demonstrations. This is $1,000,000 more than the administration request and $1,195,000 more than the fiscal year 1991 appropriation and the House allowance.

This activity funds programs offering preventive services to chronically mentally ill individuals and those at risk of developing a mental illness. The Committee believes prevention of mental illness is the most effective and the most cost-effective approach. The Committee believes this activity should have a broad focus on primary prevention and mental health promotion rather than a narrowly defined mental disorder prevention focus. Positive research findings should lead to large-scale demonstrations in real life settings. The NIMH should work with the National Prevention Coalition in the development of these projects.

The Committee has added funds over the administration request to fund prevention demonstration projects to determine the effectiveness of school-based education programs aimed at adolescents who are demonstrably at risk of suicide. The Committee is especially supportive of studies of rural and inner-city adolescents. The Committee expressly intends that these funds support youth suicide prevention demonstrations, as differentiated from studies of undiagnosed major mental disorders or antisocial behavior.

Grants to States for the homeless (PATH)

The Committee recommends $27,200,000 for PATH grants. This amount is $1,047,000 above the House allowance and the fiscal year 1991 amount, and $15,916,000 below the administration request.

The Stewart B. McKinney Homeless Assistance Amendment Act of 1990 replaced the mental health services for the homeless block grant formula with the PATH formula grant program. PATH funds are allocated according to a formula based on the proportion of a State's urban population relative to the urban population of the United States. Funds may be used by States to provide a range of services to individuals who are homeless or at risk of becoming homeless.

Homeless services demonstrations

The Committee provides $5,861,000 for service demonstrations of mental health services to the homeless. This is the same as the fiscal year 1991 appropriation and the House allowance. The administration did not request funds for this program.

These research demonstration grants provide coordinated systems of mental health, social support, and housing services for the homeless and to test targeted approaches for homeless children and adolescents with severe emotional disturbances. The Committee has provided funding to complete these 3-year demonstration projects.

Homeless research demonstrations

The Committee has not included funds for the new consolidated homeless research program. The administration requested $20,000,000 for a new program of homeless research. The House did not provide funding. The Committee has elected to continue the current program of services demonstrations.

Protection and advocacy system for the mentally ill

The Committee has provided $19,500,000 for protection and advocacy for the mentally ill. This amount is $3,886,000 more than House allowance and the fiscal year 1991 level. The administration requested no funds for this program.

This protection and advocacy program seeks to ensure that the rights of mentally ill individuals are protected while they are inpatients in treatment facilities and for 90 days following discharge from such facilities. Recognizing the continually increasing caseloads of protection and advocacy programs, the Committee has chosen to increase funds rather than terminate the program, as the administration proposed.

The Committee also supports NIMH providing ongoing training and technical assistance in areas such as management and legal advocacy techniques.

Mental health direct operations

The Committee has provided $40,982,000 for mental health direct operations, which is $3,000,000 less than the administration request and the House allowance and the same as the fiscal year 1991 appropriation. The Committee has funded administrative accounts throughout the bill at the fiscal year 1991 level.

The Institute's Direct Operations Program provides staff support for the administration of the grant and contract programs within extramural research, research training, and clinical training. It also provides staff and operating expenses to support the Community Support Program and protection and advocacy activities.

NATIONAL INSTITUTE ON DRUG ABUSE

Drug abuse research

The Committee has provided $282,544,000 for drug abuse research, including research training and instrumentation grants. This is $9,624,000 below the administration request, $5,257,000 over the House allowance, and $17,361,000 more than the fiscal year 1991 amount.

NIDA funds intramural and extramural research on the causes and consequences of drug abuse, collects information on the incidence of drug abuse, and supports prevention and treatment research.

The Committee concurs with the House Committee that NIDA should increase its support for treatment-related services research. The Committee supports medications development, but believes that services and treatment outcomes research are the most cost-effective investments, and hold more promise for making affordable treatment services available nationally.

The Committee concurs with the House Committee that NIDA should consider supporting multidisciplinary research centers to demonstrate the effectiveness of centrally coordinated substance abuse training, service, and research focused on women, children, minorities, and other underserved populations such as people living in rural areas.

Treatment demonstrations

The Committee recommends $46,955,000 for drug abuse treatment demonstrations, which is the same as the administration request and the House allowance, and $1,490,000 above the fiscal year 1991 amount.

NIDA demonstration projects provide grants and contracts for effective treatment and referrals for treatment to individuals who are abusing drugs. Funding will continue program demonstrations involving IV drug abusers; pregnant and postpartum women and their infants; and drug treatment with vocational training.

AIDS demonstrations

The Committee recommends $71,550,000 for AIDS drug abuse demonstrations, the same as the administration request and the House allowance and $1,643,000 less than the fiscal year 1991 amount.

These funds support outreach demonstration projects to recruit drug users into treatment programs. Data from these outreach projects indicate that IV drug users, who are at high risk for contracting and spreading AIDS, can be effectively counseled through outreach programs to change high-risk behaviors.

Drug abuse direct operations

The Committee has provided $32,186,000 for drug abuse program support. This amount is $3,366,000 below the administration request and the House allowance and the same as the 1991 appropriation.

The Committee has funded administrative accounts throughout the bill at the fiscal year 1991 level. These funds support staff responsible for the administrative management of NIDA's research and training programs.

NATIONAL INSTITUTE ON ALCOHOLISM AND ALCOHOL ABUSE

Alcoholism research

The Committee has provided $159,179,000 for alcoholism and alcohol abuse research, including research training and instrumentation grants. This amount is $5,000,000 over the administration request, $5,130,000 above the House allowance, and $16,213,000 above the fiscal year 1991 amount.

The NIAAA research program focuses on improving the treatment and prevention of alcoholism and alcohol-related problems. Research is supported through project grants, the National Research Centers Program, contract studies in special areas of need, and an intramural program of biological and clinical research.

Substance abuse homeless demonstrations

The Committee recommends $15,983,000 for substance abuse homeless demonstrations. This amount is the same as the fiscal year 1991 and the House amount. The administration requested no funds.

The research demonstration grants test innovative approaches to community-based services programs for substance-abusing homeless persons. Projects include outreach services, supportive living programs, case management, prevention interventions, and training for service providers. The Committee has restored funding to complete the third year of these demonstration projects.

Alcoholism direct operations

The Committee has provided $11,789,000 for alcoholism direct operations. This is the same as the fiscal year 1991 amount, and $807,000 below the administration request and the House allowance. The Committee has funded administrative accounts throughout the bill at the fiscal year 1991 level.

These funds support staff responsible for the management of the extramural research and research training programs, as well as the grant and contract review process.

OFFICE OF TREATMENT IMPROVEMENT

The Office of Treatment Improvement is responsible for the alcohol, drug abuse, and mental health services block grant, treatment grants to crisis areas, treatment improvement grants, and grants to States for the homeless mentally ill.

Alcohol, drug abuse, and mental health services [ADMS] block grant

The Committee recommends an appropriation of $1,405,670,000 for the ADMS block grant. This is $137,000,000 more than the administration request and the fiscal year 1991 level, and $170,670,000 above the House allowance. Of this amount, up to 5 percent may be set aside for technical assistance, data collection, and health services research, as required by law.

The block grant was established by Congress as part of the Omnibus Budget Reconciliation Act of 1981, which combined several mental health and substance abuse service programs into a single, State-administered block grant. Funds are distributed to the States according to a formula.

The Committee has increased funding for the block grant in order to expand the capacity of every State and territory to provide alcohol, drug abuse, and mental health services. The Committee has chosen to increase funding for the block grant rather than provide funding for the unauthorized program of capacity expansion proposed by the administration.

In providing funds to the ADMS block grant, the Committee has taken note of numerous ADAMHA reports on the prevalence of dual diagnosis nationally, and the disturbing incidence of alcohol abuse. Alcohol is often a gateway drug, leading to abuse of other drugs. Therefore, increasing the capacity to provide treatment for alcohol abuse is an effective measure for preventing further drug abuse.

Capacity expansion

The Committee has not provided funds for the new Capacity Expansion Program. This program is not authorized, and was not funded by the House. The administration requested $68,000,000.

The Committee has increased funding of the alcohol, drug abuse, and mental health services block grant in order to expand treatment capacity.

Treatment grants to crisis areas (target cities)

The Committee has provided $35,986,000 for drug treatment grants to crisis areas. This is $4,690,000 more than the fiscal year 1991 appropration and the House allowance, and $3,438,000 over the administration request.

This 3-year program, begun in fiscal year 1990, provides funds for comprehensive treatment improvement demonstrations through the States. The primary goal of the program is to implement overall systemic improvements in metropolitan areas.

The Committee has provided sufficient funds to support expansion of the number of cities participating in OTI's drug abuse treatment improvement projects in target cities. In fiscal year 1991 a number of applications from cities heavily impacted by the drug problem received approval but were not funded. The Committee intends that these funds be used to support in priority order applications already recommended for approval.

Treatment improvement grants

The Committee recommends $83,363,000 for programs to improve the quality of treatment. This is $3,335,000 less than the administration request, and the same as the fiscal year 1991 amount and the House allowance.

These funds support demonstration projects to enhance treatment for critical populations, such as racial and ethnic minorities, adolescents, rural populations, and residents of public housing projects; and provide treatment in criminal justice settings. The Committee recommendation also funds the District of Columbia treatment improvement initiative.

Direct operations

The Committee recommends $5,209,000 for OTI direct operations. This amount is $2,509,000 less than the administration request and the House allowance. The Committee has funded administrative accounts throughout the bill at the fiscal year 1991 level.

OFFICE OF SUBSTANCE ABUSE PREVENTION

The Committee recommends $284,538,000 for the Office of Substance Abuse Prevention [OSAP], $16,032,000 above the House allowance, $13,069,000 more than the 1991 level, and $2,958,000 over the administration request.

OSAP is responsible for coordination and support of ADAMHA's ongoing drug and alcohol abuse prevention activities and administering demonstration projects for prevention and treatment.

Prevention programs

The Committee has provided $135,500,000 for OSAP prevention programs. This is $9,995,000 more than the administration request, and $23,497,000 more than the House allowance and the fiscal year 1991 amount.

These competitive demonstration projects are targeted to high-risk youth, pregnant and postpartum addicts, and their infants. In addition, this activity funds conference grants, technical assistance and evaluation contracts, a communications program for community education and the National Clearinghouse for Alcohol and Drug Abuse Information.

The Committee has provided this increase for two key prevention programs serving high-risk youth, and pregnant and postpartum addicts, and their infants [PPWI]. The Committee expects OSAP to fund demonstration projects that allow low-income addicted mothers to reside with their children in treatment/prevention facilities.

Priority should be given to projects that have not received PPWI funding and that provide services in cities with exceptionally high infant mortality rates. An example of the type of project the Committee would encourage OSAP to support is Project Together in Des Moines, IA.

The Committee has included $500,000 to initiate a national education and prevention strategy for children of alcoholics and substance abusers in native American communities. The Committee encourages coordination between OSAP and the National Association of Native American Children of Alcoholics on this initiative.

Community Youth Activity Program

The Committee recommends $4,669,000 funding for the Community Youth Activity Program. This is $4,669,000 more than the administration request and $10,493,000 below the House allowance; $20,162,000 was provided in fiscal year 1991.

This activity is comprised of three components: projects of national significance designed to develop community-based activities for youth; block grants to States and territories that support community services and prevention activities; and competitive grants funded through State agencies, which fund new and innovative approaches to developing community services. The Committee has provided sufficient funding to complete the third year of ongoing demonstration projects.

Community prevention grants

The Committee provides $109,183,000 for community prevention grants. This amount is $10,065,000 more than the fiscal year 1991 amount and the House allowance, and $4,669,000 below the administration request.

The Community Prevention Program funds are awarded to community-based coalitions representing parents, schools, business, academia, and youth or other at-risk individuals. Communities convene prevention coalitions, coordinate public- and private-sector resources, and develop and implement model prevention action plans to provide support services, counseling, employment assistance, and other prevention activities. Emphasis is placed on substantial voluntary participation in the community and evaluation of programs to determine their effectiveness.

Training

The Committee recommends $20,986,000 for training. This amount is $5,000,000 below the administration request, the House allowance, and the fiscal year 1991 amount.

The OSAP national training system provides continuing education in alcohol and other drug abuse education courses for substance abuse counselors, health professionals, social workers, and community organization staff. OSAP also provides support for an Alcohol-Drug Health Professions Education Program jointly sponsored by NIAAA and NIDA. This program focuses on the development and implementation of curriculum and effective models of training for health professions institutions.

Direct operations

The Committee provides $14,200,000 for OSAP direct operations. This is $2,037,000 below the administration request and the House allowance and the same as the fiscal year 1991 amount. The Committee has funded administrative accounts throughout the bill at the fiscal year 1991 level.

These funds supports a communications initiative, including the National Clearinghouse for Alcohol and Drug Information and media campaigns; a prevention implementation initiative, which provides technical assistance to parent and youth organizations, minority organizations, and the local chapters of national organizations; and evaluation of the high-risk youth demonstrations.

Treatment outcome evaluations

The Committee recommends $8,598,000 for treatment outcome evaluations, which is the same as the administration request and the House allowance and $464,000 more than the fiscal year 1991 level. This research is designed to evaluate the most effective forms of alcohol and drug abuse treatment, such as inpatient versus outpatient, for specific patient groups, such as cocaine abusers.

Buildings and facilities

The Committee recommends $5,000,000 for buildings and facilities. This is the same as House and allowance and $2,775,000 below the administration request and the fiscal year 1991 amount.

This activity provides funds for repair and improvement of all ADAMHA intramural facilities. In fiscal year 1991, the Committee provided funds for extramural facilities. This activity has not been continued.

OFFICE OF THE ADMINISTRATOR

Program management

The Committee has provided $11,368,000 for ADAMHA program management. This is the same as the fiscal year 1991 amount and is $3,527,000 below the administration request and the House allowance. The Committee has funded administrative accounts throughout the bill at the fiscal year 1991 level.

The program management activity provides support for the Office of the Administrator, which is responsible for providing policy guidance, coordination, and general support services to the ADAMHA Institutes.

The Committee is concerned that the level of attention paid to women's health issues, both in treatment and research activities, does not reflect the fact that the majority of Americans are women. The General Accounting Office reports that ADAMHA has provided better service to women than NIH; however, the Committee believes it is important to stimulate additional research and programs in areas that hold promise to improve the health and lives of women.

To that end, the Committee directs ADAMHA to establish an Office of Women's Health Research and Services. The office should serve as a catalyst, stimulating projects and services on such topics as women and depression, women and substance abuse, and others. The office should collaborate with ADAMHA institutes and offices to assure that appropriate research, prevention, and treatment agendas for women are developed and implemented.

ST. ELIZABETHS HOSPITAL

Appropriations, 1991	$11,711,000
Budget estimate, 1992	
House allowance	
Committee recommendation	

The Committee has provided no funds for St. Elizabeths Hospital. This is the same as the administration request and the House allowance and $11,711,000 less than the fiscal year 1991 appropriation.

The District of Columbia has assumed responsibility for the operation of St. Elizabeths Hospital pursuant to the transfer mandated in Public Law 98-621, the St. Elizabeths Hospital and District of Columbia Mental Health Services Act. The Federal appropriation is a transitional payment to the District. The funds provided constitute the final transitional payment.

St. Elizabeths Hospital continues to be eligible to receive payments from three other Federal sources: Medicare, Medicaid, and reimbursements for the care of Federal beneficiaries.

Office of the Assistant Secretary for Health

PUBLIC HEALTH SERVICE MANAGEMENT

Appropriations, 1991	$67,168,000
Budget estimate, 1992	65,329,000
House allowance	69,318,000
Committee recommendation	54,302,000

The Committee recommends $54,302,000 for the Public Health Service [PHS] management activity. This is $6,027,000 less than the administration request, $12,016,000 less than the House allowance, and $7,866,000 less than the fiscal year 1991 appropriation.

The Public Health Service management appropriation supports the two major responsibilities of the Office of the Assistant Secretary for Health [OASH]. These are providing leadership and direction to Public Health Service agencies, and operating OASH programs that have a variety of missions and responsibilities.

Adolescent family life

The Committee has not included funds for the Adolescent Family Life Program. This is the same as the House amount, $7,789,000 below the fiscal year 1991 appropriation and $12,000,000 below the administration request. The authorization for the program expired September 30, 1985.

The objective of the Adolescent Family Life Program is to develop effective, family-centered demonstration models designed to prevent adolescent pregnancy. Since 1982, over $117,000,000 has been provided for these demonstrations.

HEALTH INITIATIVES

Office of Disease Prevention and Health Promotion

The Committee recommends $5,000,000 for the Office of Disease Prevention and Health Promotion. This is $423,000 above the administration request and the fiscal year 1991 appropriation and $973,000 above the House allowance.

The Office facilitates collaboration between the Federal Government and other groups to develop strategies and implement programs to prevent disease and disability and promote good health.

Physical fitness and sports

The Committee recommends $1,443,000 for physical fitness and sports activities. This is the same as the budget request, the House allowance, and the fiscal year 1991 amount.

The Physical Fitness and Sports Program provides staff support and assistance for the President's Council on Physical Fitness and Sports. Through continuing contact with national governing bodies, the Council seeks to enlist the active support and assistance of individuals, civic groups, professional associations, sports groups, and others to promote and improve the health of all Americans through regular participation in physical fitness and sports.

Minority health

The Committee recommends $15,016,000 for the Office of Minority Health. This is the same as the House allowance and the administration request and $546,000 above the fiscal year 1991 amount.

The Office of Minority Health is the focal point for developing policies affecting minority health and implementing the recommendations of the Secretary's task force on black and minority health.

National vaccine program

The Committee provides $2,300,000 for the national vaccine program. This is the same as the administration request, $10,200,000 below the House amount, and $7,331,000 below the fiscal year 1991 amount.

The program serves to coordinate basic and applied research and clinical trials of vaccines. The Committee has provided increases in direct funding of vaccine trials at NIH.

Health service management

The Committee recommends $21,770,000 for Public Health Service management activities. This is $550,000 above the administration request, the same as the House allowance, and $750,000 more than the fiscal year 1991 appropriation.

This allowance provides funding for the offices that support the Assistant Secretary for Health in providing leadership and direction to the Public Health Service. The Committee has added funding above the request to support further planning and development of the National Museum of Health and Medicine.

Acquired immune deficiency syndrome [AIDS]

The Committee recommends $8,773,000 for activities of the National AIDS Program Office. This amount is the same as the administration's request and the House allowance and is $535,000 more than the fiscal year 1991 amount.

The National AIDS Program coordination staff advises the Secretary of Health about, and provides coordination for, the Public Health Service AIDS activities.

AGENCY FOR HEALTH CARE POLICY AND RESEARCH

Appropriations, 1991	$95,756,000
Budget estimate, 1992	34,283,000
House allowance	95,756,000
Committee recommendation	69,283,000

The Committee recommends $69,283,000 for the Agency for Health Care Policy and Research [AHCPR]. This amount is $26,473,000 below the House allowance, $35,000,000 over the administration request, and $26,473,000 below the fiscal year 1991 amount. In addition, transfers of $7,773,000 from the Medicare trust fund and $49,944,000 from funds available under section 2711 of the Public Health Service Act are provided. Total funding provided for the Agency is $127,000,000.

The Agency for Health Care Policy and Research was created to promote improvements in clinical practice and patient outcomes, promote improvements in the financing, organization, and delivery of health care services, and increase access to quality care. AHCPR serves as the focal point for general health services research within the Department and as the lead agency for medical treatment effectiveness research and practice guideline development.

General health services research and technology assessment

The Committee has provided $18,459,000 for general health services research and technology assessment. In addition, $34,544,000 is made available from the section 2711 evaluation funds, and $1,050,000 from trust funds. Total funding for this activity is $54,053,000.

These funds support the extramural research grant and contract program, the intramural research program (including the national medical expenditures survey and provider studies data bases), dissemination activities (including the Local User Liaison Program), and the Office of Health Technology Assessment.

The Committee is concerned that, because AHCPR's research will form the basis for health policies into the next century, studies conducted and data collected must be relevant to the entire population and not simply to certain sectors. The Committee expects that studies funded by AHCPR shall continue to include women, minorities, and rural populations.

The Committee is pleased with AHCPR's efforts to increase rural health services research and appreciates the periodic reports submitted to the Committee on the first-time grantees funded for rural health research in fiscal year 1990 and fiscal year 1991.

The Committee continues to be pleased with the work of the State and Local User Liaison Program, which offers State and local policymakers the opportunity to benefit from the latest developments in health services research. This is especially beneficial to officials in rural States who have fewer resources available to them.

The national medical expenditure survey [NMES] provides national and regional-level estimates on what medical care Americans use, what they spend for this care, and how it is financed. As constructed in the past, the NMES survey sample did not include a sufficient number of households to develop estimates for rural areas within nonmetropolitan counties, such as frontier areas. The Committee would like the next NMES, which is scheduled for the mid-1990's, to provide data on a broader rural-urban continuum. The Committee looks forward to receiving AHCPR's report before next year's hearings outlining the costs for a range of alternatives for developing a more complete rural data base as part of the next NMES.

Medical Treatment Effectiveness Program [MedTEP]

For the Medical Treatment Effectiveness Program, the Committee has included an appropriation of $57,547,000, including a transfer of $6,723,000 from the Medicare trust funds. In addition, a transfer of $15,400,000 will be available from section 2711 funds. MedTEP supports outcomes research, data development, clinical practice guidelines, and quality standards development, and information/dissemination activities. Total funding for outcomes studies is $72,947,000.

Of the funds provided for MEDTEP, a total of $1,000,000 will be available for investigating issues that promote the development of patient care data for medical effectiveness research, such as how to improve the quality and uniformity (in definition, automated collection, and electronic transmission) of patient care data, what useful patient care data and cost data can be gained from existing automated patient care record systems, how to deal with the privacy and confidentiality of patient care data, and other issues related to the feasibility of linking research data bases and medical administrative data bases.

The Committee is pleased with the progress AHCPR is making on dissemination activities, working with HRSA, and the National Library of Medicine. The Committee hopes that the Agency will continue to support demonstrations of broad-based dissemination programs to determine the best methods of educating the range of health care practitioners on the most effective and appropriate health care practices. The Committee is encouraged that AHCPR is examining the feasibility of linking private and public data bases for outcomes research.

The Committee urges that a variety of practice disciplines that contribute to the quality of patient care, such as nursing, physical therapy, and psychology be included as components of medical outcome research initiatives. The Committee commends the multidisciplinary focus of the early clinical practice guidelines. The Committee urges AHCPR to continue to work with the National Center for Nursing Research.

Effective dissemination of outcomes research findings and medical practice guidelines is critical to ensure the value of the investment that the Congress has made in outcomes research and guideline development. The Committee is cognizant of the magnitude and difficulty of reaching a broad national audience comprised of physicians, nurses, and other health providers; third party payers; policymakers; and the general public, and the importance of disseminating material in ways that will facilitate both assimilation of information and behavior change.

Additional funding for dissemination has been provided to AHCPR for three purposes. First, it should support the broad dissemination of clinical practice guidelines, and findings from medical effectiveness and outcomes research. The variety of audiences for this information will require a heavy initial investment to ensure that specific products are tailored to each audience. Second, this additional money could be used to expand the agency's existing dissemination activities (such as publications and conferences) to widen its reach and effectiveness. Finally, a significant amount of the funds should be allocated to support more applied research and demonstrations on the most effective dissemination strategies for target audiences for practice guidelines and other results from outcomes research. In this regard, one important issue to the Committee is how to disseminate guidelines in a way that will encourage doctors to change the way they practice medicine.

HEALTH CARE FINANCING ADMINISTRATION

GRANTS TO STATES FOR MEDICAID

Appropriations, 1991	$51,554,950,000
Budget estimate, 1992	59,807,649,000
House allowance	59,899,149,000
Committee recommendation	59,899,149,000

The Committee recommends $59,899,149,000 for grants to States for Medicaid. This amount is $8,344,199,000 more than the fiscal year 1991 appropriation, and the same as the House allowance and budget request. This amount includes $13,500,000,000 in fiscal 1991 advance appropriations. In addition, $17,100,000,000 is provided for the first quarter of fiscal 1993, as requested by the administration.

The Medicaid program provides medical care for eligible low-income individuals and families. It is administered by each of the 50 States, the District of Columbia, Puerto Rico, and the territories. Federal funds for medical assistance are made available to the States according to a formula which determines the appropriate Federal matching rate for State program costs. This matching rate, which may range from 50 to 83 percent, is based upon the State's average per capita income relative to the national average.

The Committee has not restored the $306,804,000 reduction in the President's budget associated with survey and certification activities, of which $91,500,000 is reflected in this account; the remainder is in both the "Payments to health care trust funds" and the "Program management" accounts. The requested budget reduction assumes enactment of user fee legislation to finance these activities. Such legislation is under the jurisdiction of the authorizing committees, and has, therefore, not been included in this appropriations bill. In the event user fee legislation is not enacted by the authorizing committees, appropriations language creating a new survey and certification emergency fund has been included in this bill, giving the President authority to make $306,804,000 available by designating an emergency as defined in the Balanced Budget and Emergency Deficit Control Act. The House version of the bill restores funds for survey and certification activities, providing the opportunity to address this matter in conference.

Due to a technical scorekeeping issue, it is necessary for the Committee to reflect the $91,500,000 Medicaid portion of this proposed savings under the "HCFA program administration" account, where a trust fund reduction of $105,252,000 below the House allowance is reflected to achieve equivalent outlay savings. It is not the Committee's intent to reduce HCFA salaries and expenses by this drastic amount. However, this appears to be the only way for the Committee to be credited with the outlay savings assumed by the President without actually imposing the user fee legislative language. Again, the Committee expects this matter to be resolved by the time conference action is completed.

The Committee is concerned about the rapid rate of growth in Medicaid State and local administrative expenditures, which cannot be accounted for entirely by the growth in the number of beneficiaries. The Committee requests the Health Care Financing Administration [HCFA] to submit an analysis prior to the fiscal year 1993 hearings describing the major cost centers in State administrative expenditure reports and the areas of growth, as well as an explanation of which cost centers are linked to beneficiary growth and which are not. The report should also include a description of HCFA procedure to monitor and audit the appropriateness of State administrative cost claims.

PAYMENTS TO THE HEALTH CARE TRUST FUNDS

Appropriations, 1991	$35,335,000,000
Budget estimate, 1992	39,401,083,000
House allowance	39,421,485,000
Committee recommendation	39,401,083,000

The Committee recommends $39,401,083,000 for payments to the health care trust funds. This amount is $4,066,083,000 more than the fiscal year 1991 appropriation and is the same as the administration's original request.

The Committee recommendation is consistent with the latest current law estimates for the three mandatory activities which comprise these payments: supplementary medical insurance, hospital insurance for the uninsured, and the Federal uninsured payment.

The Committee endorses the administration's proposal to also fund all program management activities from a single trust fund limitation. As a result, the appropriation amount for payments to health care trust funds includes a net estimate of $96,083,000 for the general fund share of HCFA's program management administrative expenses. The general fund share will be transferred to the Federal hospital insurance trust fund on March 31, 1992, from the "Payments to health care trust funds" account. This change will allow HCFA to revise its current cost allocation system to comply with recommendations in an inspector general audit of its cost allocation procedures.

The Committee has provided $38,684,000,000 for payment to the supplementary medical insurance trust fund. This amount provides matching funds for premiums paid by Medicare part B enrollees.

The recommendation includes $584,000,000 for hospital insurance for the uninsured. This amount is the same as the administration's request and $25,000,000 more than the fiscal year 1991 appropriation. This payment reimburses the hospital insurance trust fund for Medicare benefits to individuals who have not met the necessary requirements for insured status.

This recommendation also includes $37,000,000 for the Federal uninsured benefit payment. This amount is the same as the administration's request, and $9,000,000 less than the fiscal year 1991 appropriation. This payment reimburses the hospital insurance trust fund for the cost of benefits provided to Federal annuitants now eligible for Medicare.

PROGRAM MANAGEMENT

Appropriations, 1991	$2,028,599,000
Budget estimate, 1992	1,891,027,000
House allowance	2,282,055,000
Committee recommendation	1,985,901,000

The Committee recommends $1,985,901,000 for Health Care financing Administration [HCFA] program management. This amount is $296,154,000 less than the House recommendation, $94,874,000 more than the budget request, and $96,704,000 below the fiscal year 1991 enacted level.

RESEARCH, DEMONSTRATION, AND EVALUATION

The Committee has provided $80,380,000 for HCFA research, demonstration, and evaluation activities. This amount is $44,380,000 more than the administration's request, $4,000,000 more than the House allowance, and $10,602,000 more than the fiscal year 1991 appropriation.

HCFA research and demonstration activities facilitate informed, rational Medicare and Medicaid policy analysis and decisionmaking. These studies and evaluations include projects to measure the impact of Medicare and Medicaid policy analysis and decisionmaking, to measure the impact of Medicare and Medicaid on health care costs, to measure patient outcomes in a variety of treatment settings, and to develop alternative strategies for reimbursement, coverage, and program management.

The recommended funding level will provide for both the continuation of current activities and the startup of new projects. Priority areas for HCFA research include quality of care, physician payment systems, and preventive care. A large percentage of HCFA research, demonstration, and evaluation activities is mandated by the Congress.

The Committee has included $25,000,000 to continue the Rural Health Care Transition Grant Program. This is $602,000 more than the fiscal year 1991 appropriation. The administration did not request fiscal year 1992 funding for this program. Designed to help small rural hospitals adjust to the changing health care environment, this program was initiated in fiscal year 1989 and is authorized through fiscal year 1992.

The Committee recommends $9,759,000 for the Essential Access Community Hospitals/Rural Primary Care Hospitals [EACH/RPCH] Program for which there was no budget request. The program provides grants to States to plan and implement a rural health care plan and rural health network. It also provides grants to hospitals and facilities up to $200,000 for the costs of converting to essential access or rural primary care hospitals.

The Committee recommendation includes $10,000,000 for the program authorized under section 4360 of OBRA for grants to States for health insurance information, counseling, and assistance programs. Any counseling programs funded should be coordinated by an agency described in section 4360(d)(1)(A) or 4360(d)(1)(c)(ii) of OBRA 90. The programs will help Medicare beneficiaries make informed decisions about the purchase of health insurance to supplement Medicare. The Committee expects that States receiving grants under this program will identify older individuals who are eligible for the Qualified Medicare Beneficiary Program, inform them of the benefits of this program, and refer them to the local agency responsible for enrollment in this program.

The Committee expects the agency to use $2,000,000 of the funds provided to resume the three case management demonstration projects approved under section 425 of the Medicare Catastrophic Coverage Act of 1988 and reauthorized in section 4027(f) of the Omnibus Budget Reconciliation Act of 1990.

The Committee recommends funding of a demonstration project to assess Medicare reimbursement policies for the frail elderly; with special consideration for geriatric hospitals with a patient mix that is 99 percent Medicare-covered.

MEDICARE CONTRACTORS

The Committee recommends $1,457,000,000 for Medicare contractors. This amount is the same as the administration's request, and $36,959,000 less than the comparable fiscal year 1991 appropriation. This recommendation provides for a $257,000,000 contingency fund to meet unanticipated operating costs, the same level recommended by the House.

The Medicare contractors, usually insurance companies, are responsible for reimbursing Medicare beneficiaries and providers in a timely and fiscally responsible manner. These contractors also provide information, guidance, and technical support to both providers and beneficiaries.

The Committee has provided additional contingency funds in order to meet growing workload projections, as well as to enhance payment safeguard activities. The Committee recognizes that operating funds are not sufficient to handle all of Medicare contractors' competing workloads, but was unable to increase the amount over the President's request, due to severe budgetary constraints. The Committee expects the Health Care Financing Administration to work with its contractors to maintain current levels of performance for critical services and, where appropriate, identify and implement operational efficiencies.

The Committee expects that any contingency funds determined to be required will be released promptly in order to avoid disruptions in services to Medicare beneficiaries and providers.

The Committee has included bill language directing the Secretary to make a determination about the release of contingency funds not later than October 31, 1991. Further determinations about the release of additional funds are to be made not later than the beginning of each quarter of the year. Immediately after the October 31 date, the Committee expects that the Secretary shall report on the basis for his decision, the effects on the quality of administrative services to beneficiaries and providers and the need for additional funds to be released later in the year. The Committee also requests that the Comptroller General review the Secretary's report and to recommend whether the funds released are sufficient for Medicare contractor activities and his findings on any changes in the level or quality of services to beneficiaries and providers.

The Committee expects that, as the highest priority, the release of the contingency fund will be used to respond to all beneficiary and provider inquiries concerning Medicare claims, that toll-free telephone lines will be continued, and that hearings and appeals on claims will be conducted within current timeframes.

STATE SURVEY AND CERTIFICATION

The Committee has not accepted the administration's proposal to assess fees from all providers and suppliers in the Medicare and Medicaid programs, which would have required the annual payment of such fees as a mandatory condition for Medicare and Medicaid program participation. However, the Committee has not restored the funds, as did the House, for activities related to surveys and certification, administrative or direct costs. Instead, bill language has been included, as described under the "Grants to States for Medicaid" account, giving the President authority to spend funds by declaring an emergency, in the event user fee legislation is not enacted by the authorizing committees.

FEDERAL ADMINISTRATION

The Committee recommends a total of $191,521,000 for Federal administration, which is $106,506,000 below the budget request level. This recommendation assumes collection of $77,000 in health maintenance organization user fees, and is $109,640,000 less than the fiscal year 1991 appropriation. A reduction of $105,252,000 from the House allowance is included, related to the President's survey and certification user fee proposal, as described in the grants to States for Medicaid portion of this report. A further reduction of $34,902,000 below the House recommendation relates to the proposed legislative savings in Federal administration. The Committee does not expect the Health Care Financing Administration to initiate any action to reduce staffing, pending resolution of these matters in conference with the House. Without these technical adjustments, the Committee recommendation would be the same as the House for Federal administrative expenses.

The Committee concurs with House report language relating to Worcester City Hospital, under the Health Care Financing Administration's "Federal administration" account.

Medicare physician payment reform

The Committee is very concerned that the Department's proposed regulations implementing Medicare physician payment reforms will, if not revised, force an additional multibillion dollar cut in the Medicare program. This dramatic Medicare cut would be in direct violation of congressional intent in enacting payment reforms. The reforms were explicitly designed to be budget neutral.

The proposed payment cuts outlined in rules issued by the Health Care Financing Administration [HCFA] on June 5 would severely reduce or eliminate greatly needed improvements in payments for primary care and care provided in rural areas. It would also force much greater than intended reductions in Medicare payments for specialty care. The administration proposal would, therefore, undercut a major portion of the intended impact of the reforms enacted by Congress in 1989 and would jeopardize access to essential health care services to many older and disabled Americans who rely on Medicare. Access to care would be most threatened in rural America where Medicare payments have been historically low. Older and disabled Americans in these areas are already experiencing access problems because of inadequate Medicare payment rates.

Therefore, the Committee directs the Administrator of HCFA to promptly reevaluate the proposed rule and make changes to assure that implementation of the Medicare physician payment reforms meets congressional intent regarding budget neutrality and increased payments for primary and rural care. The Committee expects to take further steps, including the possible withholding of administrative funds to implement these regulations, if satisfactory revisions are not made by September 15, 1991.

Nursing home reform

The Committee is concerned that over 3 years after enactment of the Omnibus Budget Reconciliation Act of 1987, the Secretary has not promulgated final regulations implementing the nursing home reform provisions of this legislation. The failure to promulgate final regulations has resulted in great confusion and uncertainty among nursing homes, nursing home residents and their families, and State and Federal regulators. The nursing home reforms enacted by Congress were intended to benefit both nursing home residents, through increased rights and increased quality of care and life requirements, and nursing home operators and staff through more consistent and more outcome-oriented surveys. The Department's failure to publish final regulations has seriously impeded realization of the intent of these reforms. The Committee, therefore, directs the Secretary to publish final regulations relating to OBRA 1987 nursing home reforms, without delay.

Home health care

The Committee has learned that HCFA plans to reinstitute sampling audit techniques as a basis for denying Medicare home health care service claims. Using this technique, home health care claims can be retroactively denied and repayment demanded without having been individually reviewed by the Medicare intermediary. Denial of a claim can be based simply on findings of an audit of a sampling of other claims for services provided by an individual home health agency. Because each elderly or disabled recipient of home health care services has different individual health care needs, the use of sampling as a mechanism for denying payment for care is not justifiable policy. The Committee believes that this practice is inherently unfair and that denial of claims and recoupment of payments should only be made in those cases where the individual claim has been reviewed and found to be unallowable. Therefore, the Committee calls upon HCFA to stop this practice.

Redtape

In its report last year, the Committee indicated its strong concern over the increasing numbers of complaints from Medicare beneficiaries and providers in rural and other areas concerning the adverse impact of Medicare regulations and paperwork on access to and quality of Medicare services. The Committee continues to be concerned about this disturbing trend and continues its belief that paperwork and other regulatory requirements can be reduced while increasing quality and decreasing program costs. The Committee is not satisfied with efforts by the Department to address its concerns in this area. The Committee, therefore, directs the Secretary to take steps to reduce paperwork requirements under the Medicare program by 20 percent and to report back to the Committee by no later than June 1, 1992, regarding its progress in implementing this directive.

The Committee commends the agency for its efforts to simplify the explanation of Medicare benefits [EOMB] form. Such information is an important tool for beneficiaries in understanding Medicare coverage and identifying billing inaccuracies. While the revised EOMB form is a substantial improvement over previous documents, it still does not address balance billing limits. Balance billing is the difference between the total charges for services and the amount approved by Medicare. Congress enacted limits on balance billing to protect Medicare beneficiaries from extraordinary out-of-pocket costs. Access to balance billing information is vital for beneficiaries in order for them to know if they have been charged more than the law allows. The Committee strongly urges HCFA to include information, beginning with its 1992 revised EOMB form, that makes it possible for beneficiaries to assess whether the amount their physician is charging is accurate.

Qualified Medicare Beneficiary Program

The Committee is aware that as many as 23 million of the very low-income older Americans eligible for the Qualified Medicare Beneficiary [QMB] Program, also known as the Medicare Buy-in Program, may not be receiving that benefit. The QMB Program provides for Medicaid payment of Medicare out-of-pocket premiums for older individuals with annual incomes below $6,620 and assets of less than $4,000. The Committee notes that similar underenrollment problems occurred when the Supplemental Security Income

[SSI] Program was established. When general media campaigns to inform older Americans of their eligibility for SSI failed, the Federal Government successfully turned to outreach effort by community-based organizations such as community action agencies [CAA's], now funded under the community services block grant, and area agencies on aging [AAA's], authorized under the Older Americans Act.

Therefore, the Committee directs the Department to initiate and coordinate efforts by the Health Care Financing Administration, the Administration on Children and Families, the Social Security Administration, and the Administration on Aging, to undertake a community-based outreach effort, utilizing the services of organizations such as CAA's and AAA's, to increase enrollment of eligible older Americans in the QMB Program. The Committee requests that the Department recommend to this Committee ways by which the costs of such community-based outreach efforts can be reimbursed.

Drug use reviews

To optimize use of finite resources the Committee instructs HCFA to cooperate with the Agency for Health Care Policy and Research [AHCPR] in the design of demonstration projects mandated by section 4401(c) of the Omnibus Budget Reconciliation Act of 1990. The Committee expects these demonstrations to test the comparative cost effectiveness of educating physicians through face-to-face detailing versus mailed written alerts, and of facilitating the provision of cognitive services by pharmacists by making payment for the performance of such services, independently of the act of dispensing medications. The Committee further expects that preference in selecting sites and awarding demonstration funds will be afforded those applicants which can assure they have (1) incorporated controlled design into their proposal, (2) secured a commitment from appropriately qualified researchers (such as those affiliated with schools of medicine and pharmacy) to participate in the operation and evaluation of the demonstration, and (3) secured a commitment of matching funds from a non-Federal source.

SOCIAL SECURITY ADMINISTRATION

PAYMENT TO SOCIAL SECURITY TRUST FUNDS

Appropriations, 1991	$46,958,000
Budget estimate, 1992	40,968,000
House allowance	40,968,000
Committee recommendation	40,968,000

The Committee recommends an appropriation of $40,968,000 for payments to Social Security trust funds, the same as the administration request and the House allowance. The recommendation is $5,990,000 less than the fiscal year 1991 appropriation of $46,958,000.

These funds reimburse the old-age and survivors insurance and disability insurance trust funds for special payments to certain uninsured persons, costs incurred administering pension reform activities, the value of the interest for benefit checks issued but not negotiated, and financing for a new legend on Social Security number cards issued to alien applicants with temporary work authorizations. The new legend will improve use of the card as part of the employer verification requirements under the Immigration Reform and Control Act of 1986 (Public Law 99-603); however, this change can be implemented only when Congress specifically provides funds, other than trust funds, for its implementation as required by section 274A(d)(3)(E) of the Immigration and Nationality Act. This appropriation restores the trust funds to the same financial position they would have been in had they not borne these costs, properly charged to the general funds.

The fiscal year 1992 appropriation decreases because special payments for certain uninsured persons declines due to a declining beneficiary population.

SPECIAL BENEFITS FOR DISABLED COAL MINERS

Appropriations, 1991	$844,591,845
Budget estimate, 1992	820,336,000
House allowance	820,336,000
Committee recommendation	820,336,000

The Committee recommends an appropriation of $820,336,000 for special benefits for disabled coal miners, which includes the $203,000,000 appropriated last year as an advance for the first quarter of fiscal year 1991. The recommendation is $24,255,845 less than the comparable fiscal year 1991 amount of $844,591,845 and the same as the House allowance.

These funds are used to provide monthly benefits to coal miners disabled by black lung disease and to their widows and certain other dependents, as well as to pay related administrative costs.

Social Security's major responsibility is for claims filed before June 1973, with the Department of Labor having responsibility for claims filed after that date. By law, increases in black lung benefit levels are tied directly to Federal pay increases. The year-to-year decrease in this account reflects a declining beneficiary population partially offset by a projected 4.2 percent benefit increase in January 1992.

The Committee recommends an advance of $198,000,000 for the first quarter of fiscal year 1993, the same as the administration request and the House allowance.

SUPPLEMENTAL SECURITY INCOME

Appropriations, 1991	$17,640,921,000
Budget estimate, 1992	17,476,491,000
House allowance	17,476,491,000
Committee recommendation	17,479,491,000

The Committee recommends an appropriation of $17,479,491,000 for supplemental security income [SSI], which includes the $3,550,000,000 appropriated last year as an advance for the first quarter of fiscal year 1991. The recommendation is $161,430,000 less than the comparable fiscal year 1991 amount of $17,640,921,000 that included one time program and administrative funding appropriated for the *Zebley* court case.

These funds are used to pay benefits under the SSI Program, which was established to ensure a Federal minimum monthly benefit for aged, blind, and disabled individuals, enabling them to meet basic needs. In many cases, SSI benefits supplement income from other sources, including Social Security benefits. The funds are also used to reimburse the trust funds for the administrative costs of the program with a final settlement by the end of the subsequent fiscal year required by law, support the referral and monitoring of certain disabled SSI recipients who are drug addicts or alcoholics and to reimburse State vocational rehabilitation services for successful rehabilitation of SSI recipients.

The Committee recommends an advance of $5,240,000,000 for the first quarter of fiscal year 1993, the same as the House allowance.

The Committee recommendation includes $1,321,391,000 for payment to the Social Security trust funds for administrative expenses, an increase of $138,013,000 over fiscal year 1991 and $39,100,000 for beneficiary services, an increase of $6,583,000 over fiscal year 1991.

The Committee recommendation includes a total of $14,000,000 for research and demonstration projects, an increase of $3,000,000 over the budget request and House allowance. Included in this amount is $6,000,000 to continue a program initiated in 1990 to provide outreach to potential SSI recipients, particularly the elderly. In recognition of the large numbers of very low income older Americans who are not participating in the Qualified Medicare Beneficiary [QMB] Program to which they are entitled, the Committee urges that these outreach efforts include efforts to increase the enrollment in the QMB Program. About $6,900,000 is estimated to be used (along with funds from the disability insurance trust fund under section 505 authority of the Disability Amendments of 1980) to fund Project Network. This project will test ways to increase opportunities for SSA's clients with disabilities to receive the services they need to return to work.

LIMITATION ON ADMINISTRATIVE EXPENSES

Appropriations, 1991	($4,389,309,000)
Budget estimates, 1992	(4,532,000,000)
House allowance	(4,582,000,000)
Committee recommendation	(4,442,000,000)

The Committee recommends a limitation on administrative expenses of $4,442,000,000, $140,000,000 less than the House allowance, and $90,000,000 less than the budget request. This is an increase of $52,691,000 from the comparable fiscal year 1991 limitation amount of $4,389,309,000 that includes the $232,000,000 supplemental appropriation for work generated by the *Zebley* court case. The Committee recommends that $50,000,000 be set aside as a contingency fund.

This account provides resources from the Social Security trust funds to administer the Social Security retirement and survivors and disability insurance programs, and certain Social Security health insurance functions. As authorized by law, it also provides resources from the trust funds for certain nontrust fund administrative costs, which are reimbursed from the general funds. These include administration of the Supplemental Security Income Program for the aged, blind, and disabled; work associated with the

Pension Reform Act of 1984; and the portion of the annual wage reporting work done by the Social Security Administration for the benefit of the Internal Revenue Service. The dollars provided also support automated data processing activities and fund the State disability determination services which make disability determinations on behalf of the Social Security Administration.

The year-to-year increase is primarily to fund the built-in costs of maintaining Social Security staffing, disability State agency staffing, computers, telephones, facilities and related support services at current levels. These increases are driven by pay raises, within-grades, promotions, and increases for retirement benefits, health benefits, rent, postage, medical costs, printing and supplies. Increases are also budgeted to improve service to the public through investments in technology, improvements in working conditions and training for SSA employees, and replacement of worn out equipment.

The reduction from the budget request reflects the severe outlay constraints facing the Labor-HHS Subcommittee. This may require delaying a significant portion of planned enhancements to ADP and telecommunications systems, but should not curtail budgeted staffing levels.

Busy signals

The Committee understands that the Social Security Administration is continuing to address the persistent busy signal rates that have plagued the 800 number service since the inception of the program in October 1989. The Committee feels that steps being taken by the SSA to publish local office numbers in telephone directories, and provide these numbers to callers of the 800 number services, will go a long way in reducing these busy signal rates. These steps will ensure prompt, accurate, and courteous telephone service to the public and especially to the elderly and handicapped who rely so heavily on these services. Every effort should be taken to publish local office telephone numbers as quickly as possible.

Chronic fatigue syndrome

The Committee reiterates its concern regarding the handling of disability claims filed by individuals afflicted with chronic fatigue syndrome [CFS]. CFS sufferers, who are qualified for disability benefits, continue to encounter difficulties in receiving payments. The Committee directs the Social Security Administration to continue to update the guidelines for handling CFS claims, including the most current medical information on the illness; increase awareness of this illness by all staff involved in disability claims processing; and take steps to facilitate a consistent national policy for resolving the disability claims of individuals with CFS.

Service for the deaf

The frustration faced by deaf persons in their attempts to handle Social Security matters by telephone have been expressed to the Committee. Many Social Security questions and communications cannot be handled by the general operator who staffs the Social Security 800 telephone devices for the deaf (TTD) line. These communications, which may involve detailed questions or appointment information can only be handled by the local caseworker responsible for a client's file. Currently, there is no way for the deaf client to gain direct access by telephone to this person. In addition, written communications from local Social Security offices often require telephone follow up by Social Security beneficiaries. The communications contain the local caseworker's voice telephone number, and instructs the recipient to telephone that number within a limited number of days.

While the Committee understands that the Social Security Administration has initial steps to improve services to the deaf, more needs to be done. The Committee, therefore, has included $300,000, within the funds available, for the installation of TTD's in local Social Security offices in an effort to provide equal access for deaf individuals.

Unhealthy building

The Committee is aware that a number of employees within SSA's Security West Building have reported potential health problems which the employees believe may be linked to their workplace. The problems include severe headaches, eye irritations, and respiratory conditions. The Committee directs SSA, in cooperation with NIOSH, GSA, EPA, and other appropriate agencies, to conduct a comprehensive review of these reported health problems and of the building's air quality. SSA is expected to report to the Committee on its findings and on its plans to remedy any documented workplace problems within 90 days of enactment of this bill.

ADMINISTRATION FOR CHILDREN AND FAMILIES

FAMILY SUPPORT PAYMENTS TO STATES

Appropriations, 1991	$10,995,146,000
Budget estimate, 1992	11,862,146,000
House allowance	11,862,146,000
Committee recommendation	11,901,046,000

The Committee recommends an appropriation of $11,901,046,000 for family support payments to States, which is in addition to $3,300,000,000 appropriated in fiscal year 1991 as an advance for the first quarter of 1992. This appropriation is $38,900,000 over the administration's request and House allowance, and $905,900,000 more than the fiscal year 1991 comparable appropriation of $10,995,146,000.

Funding under this program supports grants to States for the Federal share of public assistance for the needy and for child support enforcement and child care activities. Aid to families with dependent children [AFDC] is the largest of the assistance programs in this account. These dollars support children in need who have been deprived of parental support by the death, disability, or continued absence of a parent from the home, or the unemployment of the principal wage earner. The Committee recommendation includes $12,135,000,000 for benefit payments under the Aid to Families With Dependent Children Program and $16,346,000 for payments to the territories.

Funds are also provided to cover the costs of child care for welfare recipients who need this service to participate in State job opportunities and basic skills [JOBS] training programs, to provide transitional child care for welfare recipients who leave the rolls as a result of increased earnings, and for low-income families who are not receiving AFDC and need such care in order to work, or who would otherwise be at risk of becoming eligible for AFDC. Unless child care is provided as necessary to JOBS participants, States cannot require their participation.

Other types of benefits provided under this appropriation include emergency assistance, assistance to destitute or ill Americans who have been repatriated, and assistance to adults in Puerto Rico and the territories. The Child Support Enforcement Program assists families by locating absent parents, establishing paternity, and enforcing support obligations to insure that children are financially supported by both parents. Grants made under this account also include funds for the Federal share of the costs States incur in administering these programs. The Committee's recommendation is the same as the President's estimates of the amounts needed for these entitlement programs.

For emergency assistance, the Committee has provided the amount requested by the President, $176,900,000, exclusive of projected regulatory savings of $38,900,000. If regulatory savings are achieved, the appropriation will be automatically reduced. The Committee recommendation also includes $1,000,000 for repatriation and $1,512,800,000 for State and local welfare administrative costs. Finally, the Committee recommendation includes $433,000,000 for the costs of JOBS child care and transitional child care and $300,000,000 for the newly created at-risk child care program.

For child support enforcement, $1,309,000,000 is included for State and local administration. These costs are offset by the Federal share of collections, estimated at $1,015,000,000. In addition, Federal incentive payments of $332,000,000, an increase of $36,000,000 over fiscal year 1991, are provided.

The Committee has also included $4,000,000,000 as a first quarter advance for fiscal year 1993, the same as the budget request.

As discussed under the program administration accounts, the Committee has included a technical bill language proviso streamlining collection of previously authorized fees for State use of the Federal Parent Locator Service.

PAYMENTS TO STATES FOR AFDC WORK PROGRAMS

Appropriations, 1991	$1,000,000,000
Budget estimate, 1992	1,000,000,000
House allowance	1,000,000,000
Committee recommendation	1,000,000,000

The Committee recommends $1,000,000,000 for payments to States for AFDC work programs, the same amount as is in the House allowance and budget request.

This appropriation will support job opportunities and basic skills [JOBS] training programs in all States. JOBS programs were created as part of the Family Support Act of 1988 and are intended to assure that needy families with children obtain the education, training, and employment they need to avoid long-term welfare dependence. Since October 1991, all States have implemented a JOBS program; by October 1, 1992, all States must offer these programs on a statewide basis.

LOW-INCOME HOME ENERGY ASSISTANCE

ENERGY ASSISTANCE EMERGENCY FUND

Appropriations, 1991	$1,610,235,000
Budget estimate, 1992	1,025,000,000
House allowance	1,600,000,000
Committee recommendation	1,600,000,000

The Committee recommends an appropriation of $1,600,000,000 for energy assistance programs, composed of $1,300,000,000 for the regular Low-Income Home Energy Assistance Program [LIHEAP] and $300,000,000 for the energy assistance emergency fund. This compares to the House allowance of $1,000,000,000 for regular LIHEAP grants and $600,000,000 for the emergency fund.

LIHEAP grants are awarded to the States, territories, and Indian tribes to assist low-income households in meeting the costs of home energy. States receive great flexibility in how they provide assistance, including direct payments to individuals and vendors and direct provision of fuel. LIHEAP grants are distributed by a statutorily defined formula based in part on each State's share of home energy expenditures by low-income households nationwide.

Of the $1,415,000,000 appropriated in fiscal 1991, $74,610,000 was reserved through delayed obligation for use in starting up activities for this winter's program. The Committee recommendation provides $445,000,000 on a delayed-obligation basis, in order to keep total outlays at the same level as the House, while providing a higher level of appropriations for the regular program. This provides a balance of $855,000,000 in nondelayed funding for LIHEAP, which the Committee expects will be made immediately available for use in the upcoming winter months. The funds provided on a delayed-obligation basis can be used to cover additional program costs, on a reimburseable basis.

The Committee concurs with the House bill language modifying the administration's request for an emergency fund, making it available only upon submission by the President of a formal request designating it as an emergency under terms of the Balanced Budget and Emergency Deficit Control Act. The amount recommended is $300,000,000, however, compared to the $600,000,000 House allowance. The President would have the authority to release all or part of the emergency fund, based on such factors as home heating price increases, severe temperatures, or other assessments of need. The Committee takes this action due to severe budget constraints on outlays.

The Committee intends that $25,000,000 of the amount provided for delayed obligation for the regular Low-Income Home Energy Assistance Program be used for the newly authorized leveraging incentive fund, which will provide a percentage match to States for private or non-Federal public resources allocated to low-income energy benefits.

REFUGEE AND ENTRANT ASSISTANCE

Appropriations, 1991	$410,630,000
Budget estimate, 1992	410,630,000
House allowance	294,014,000
Committee recommendation	410,630,000

The Committee recommends $410,630,000, the same as the budget request and $116,616,000 over the House allowance, for refugee and entrant assistance to assist an estimated 120,000 refugees expected to arrive in the United States in 1992.

The Refugee Assistance Program is designed to assist States in their efforts to assimilate refugees into American society as quickly and effectively as possible. The program reimburses States for State-administered cash and medical assistance, employment services, targeted assistance, preventive health, and the voluntary agency matching grant program.

To help meet the goal of assimilating refugees into society as soon as possible, the Committee allowance provides $234,216,000 for cash and medical assistance and State administration; $82,952,000 for employment services, the same as the 1991 appropriation; $48,795,000 for targeted assistance; $5,631,000 for preventive health; and $39,036,000 for the voluntary agency program, the same as the fiscal 1991 appropriation. Of the amount for cash and medical assistance, $116,616,000 is provided on a delayed-obligation basis, due to the severe outlay constraints facing the Labor-HHS Subcommittee.

Targeted assistance provides grants to States for counties which are impacted by high concentrations of refugees and high dependency rates. The Committee intends that $19,000,000 of the total be provided to continue the current program of support to communities affected as a result of the massive influx of Cuban and Haitian entrants during the Mariel boatlift. The Committee also intends that 10 percent of the total appropriated for targeted assistance be used for grants to localities most heavily impacted by the influx of refugees such as Laotian Hmong, Cambodians, and Soviet Pentecostals, including secondary migrants who entered the United States after October 1, 1979. The Committee expects these grants to be awarded to communities not presently receiving targeted assistance because of previous concentration requirements and other factors in the grant formulas, as well as those who do currently receive targeted assistance grants. The Committee intends that the State of California shall be held harmless in the formula allocation of targeted assistance funds as a result of any reductions to the total amount appropriated for the targeted assistance program. California's total share of funding under the formula allocation in fiscal year 1992 should be no less than the percentage share of California's allotment under fiscal year 1991 appropriations. In determining the hold harmless allocation to California, the total amount appropriated for targeted assistance will be used.

STATE LEGALIZATION IMPACT ASSISTANCE GRANTS

Appropriations, 1991	$273,146,000
Budget estimate, 1992	−1,122,991,885
House allowance	−1,122,991,885
Committee recommendation	−1,122,991,885

The Committee has approved the deferral of $1,122,991,885 in funds previously appropriated for the State Legalization Impact Assistance Grants [SLIAG] Program in fiscal years 1990 and 1991 and deferred to fiscal year 1992. The Immigration Reform and Control Act of 1986 [IRCA] established SLIAG grants for States for each of fiscal years 1988 through 1991 to assist States with the costs of providing financial, medical, and educational assistance to newly legalized aliens. By the end of fiscal 1991, most of these aliens will have lived and worked in the United States for 10 years.

Recent State data show that costs from the IRCA continue to lag behind earlier expectations. As of May 7, 1991, States had drawn down less than $1,500,000,000 of the almost $2,400,000,000 obligated to date. This leaves States with almost $1,000,000,000, which is available for expenditure through fiscal 1994. Therefore, further deferral to 1993 is recommended of the funds previously deferred for use in fiscal 1992.

The Committee concurs with the House bill language which requires grant awards to be made no later than October 15, 1992. This will result in a delay of 5 months from the time funds would have been available without deferral of appropriations from fiscal 1992 into fiscal 1993. This action is taken due to severe budgetary constraints, but does not represent a reduction in overall funds committed to this program.

The Committee has received testimony that some States may request reimbursement drawdowns in excess of their allocations through fiscal year 1992. At the same time, other States may have already been allocated funds in excess of their needs over the life of the program. Therefore, the Committee directs that the Department submit to the Congress within 120 days a report outlining the extent of the fiscal year 1992 shortfall and options for mitigating program disruptions in shortfall States, taking into consideration the needs of States with current surpluses. The report should include recommendations regarding the feasibility of the reallocation of funds to correct any funding imbalances among the States.

PAYMENTS TO STATES FOR CHILD CARE ASSISTANCE

Appropriations, 1991	$731,925,000
Budget estimate, 1992	744,925,000
House allowance	850,000,000
Committee recommendation	838,000,000

The Committee recommends $838,000,000 for payments to States for child care assistance, an increase of $93,075,000 over the budget request.

Payments to States for child care assistance is being requested as a new appropriation account in fiscal 1992. (For fiscal year 1991, funds were appropriated under the "Human development services" account.) It includes requests for two activities: the child care and development block grant, newly created by the Omnibus Budget

Reconciliation Act of 1990, and the Child Care Licensing Improvement Grant Program, extended by OBRA 1990 through 1994 and previously funded from the "Family support payments to States" account.

The Committee recommends the authorized level of $825,000,000 for the child care and development block grant. These dollars provide grants to States to provide low-income families with financial assistance for child care; for improving the quality and availability of child care; and for establishing or expanding child development programs. Similar to fiscal year 1991, funds will become available for obligation to States on September 19, 1992.

The Committee recommendation concurs with the President's request to continue child care licensing grants to States at the fiscal 1991 level of $13,000,000. The House allowed $25,000,000 for this activity. These grants provide funds for improving child care licensing and registration requirements, enforcing standards with respect to child care provided to children and providing training for child care providers. At least one-half of each State's grant must be used to provide such training for providers.

Although the House recommended $850,000,000 for child care assistance in fiscal 1992 composed of $825,000,000 in the block grant and $25,000,000 for licensing, it also proposed a $144,925,000 rescission of fiscal 1991 appropriations. The Committee does not agree with this rescission and recommends that the entire $731,925,000 previously appropriated for the child care block grant be made available as scheduled, on September 7, 1991.

COMMUNITY SERVICES BLOCK GRANT

Appropriations, 1991	$427,737,000
Budget estimate, 1992	10,832,000
House allowance	420,724,000
Committee recommendation	451,431,000

The Committee recommends an appropriation of $451,431,000 for the community services programs, $23,691,000 more than the fiscal year 1991 funding level.

The community services block grant [CSBG] makes formula grants to States and Indian tribes to provide a wide range of services and activities to alleviate causes of poverty in communities and to assist low-income individuals become self-sufficient. The majority of CSBG funds go to community action agencies who administer these activities. A funding level of $370,000,000 is recommended for the community services block grant compared to the $349,372,000 House recommendation.

The Committee believes that the community services programs have proved successful in providing a wide array of services to the poor. While community action agencies, the mechanism by which most of these services are provided, receive only a small percentage of their funding from community services programs, this funding is necessary to maintain operations. These agencies provide services to the poor in areas such as: employment, education, housing, nutrition, emergency services, and health.

Several discretionary programs, as well as the Demonstration Partnership Program and the Community Food and Nutrition Program, are funded from this account. Funding for these discretionary programs is recommended at the following levels for fiscal 1992: National youth sports, $10,832,000; community economic development, $22,000,000; rural housing and community facilities, $4,099,000; farmworker assistance, $3,025,000; technical assistance, $244,000; demonstration partnership, $4,050,000; and community food and nutrition, $7,000,000.

In recognition of the recently expanded authorization, the recommendation for the Community Food and Nutrition Program is more than double the current funding level. This program provides funding to local and statewide agencies for innovative projects to reduce hunger among low-income families and children.

The Community Economic Development [CED] Program provides grants to nonprofit community development corporations [CDC's]. These funds are used, in conjunction with other public and private funds, to invest in business enterprises which promote job creation and business opportunities in low-income urban and rural communities. At least 75 percent of the jobs created by CED funds must go to low-income individuals.

The CED funds have been an important economic development tool for low-income urban and rural communities across the country. The availability of these fund is particularly important in the current economic downturn. In many parts of the country, and especially rural areas, private financial institutions are limiting lending to small and emerging businesses. CED funds are often used to encourage the private sector to invest in such business enterprises. The most recent HHS report on the program indicates that in 1987 some $67,000,000 in outside investment was leveraged by CED grants. The continued availability of CED funds may make it possible for businesses in low-income areas to survive in difficult economic times.

Competition for CED funds is keen. In fiscal 1990 only about one in four applications was funded. The $22,000,000 Committee recommendation, provided on a delayed-obligation basis, will help address these needs.

The Committee notes that the Community Economic Development Program announcement for fiscal year 1991 was not released until June 1991. This is at least 2 months later than the normal practice and this late date makes it difficult for both local applicants to plan their applications and business development cycle. The Committee expects the fiscal 1992 program announcement to be made on a schedule consistent with previous years.

The Committee recommendation includes $1,000,000 directed to special populations under the Community Demonstration Partnership Program. The Committee continues to recognize the urgent need to find innovative solutions for solving the problems confronting disadvantaged youth, particularly among minority populations. The Committee is aware that community action agencies in Boston, Milwaukee, and Fresno have developed programs that successfully respond to this critical need and encourages the Department to give careful consideration to their proposal when awarding the $1,000,000 available for this program.

The Senate recommendation restores bill language deleted by the House from the fiscal 1991 enacted appropriation which delineates specific amounts for each of the discretionary programs within the "Community services block grant" account.

The Committee also recommends $30,181,000 for the Community Services Homeless Program, the same total amount appropriated in fiscal 1991. These funds will allow for a comprehensive and coordinated effort to provide shelter to the homeless within each State.

PROGRAM ADMINISTRATION

Appropriations, 1991	$86,828,000
Budget estimate, 1992	87,500,000
House allowance	87,500,000
Committee recommendation	89,828,000

The Committee recommends an appropriation of $89,828,000 for program administration, which is $2,328,000 over the level of the budget request.

This "Program administration" account funds Federal administration costs for the Administration for Children and Families programs. The Committee congratulates the Secretary on the creation of the Administration for Children and Families, which combines the people, the talent, and the programs of the former Family Support Administration; the Office of Human Development Services, with the exception of the Administration on Aging; and the maternal and child health block grant of the Public Health Service. The new Administration for Children and Families is a great step forward to focus our Nation's commitment to helping and strengthening our children and families, starting at the National level and continuing right through to the State and local level to deliver coordinated, complementary, and integrated services and assistance.

The Committee concurs with the administration's proposal to augment appropriated funds for the "Program administration" account with currently authorized Federal parent locator service [FPLS] user fees. The FPLS assists States in locating absent parents who owe child support.

The Committee has included bill language to allow the Department of Health and Human Services to transfer withheld State child support funds in the "Family support payments" [FSPS] account to the "Administration for Children and Families Program Administration" account. This language would permit the use of a more efficient approach to collect fees for State use of the Federal Parent Locator Service [FPLS]. The new approach would allow the Department of Health and Human Services to reduce States' quarterly payments for the Federal share of child support administrative costs by the amount of the fees, and to transfer the withheld amounts directly to the "Program administration" account. This is a revision of language in the President's budget which envisions direct periodic billing of States for their fees.

Proposed language is also needed to allow HHS to transfer withheld State AFDC funds in the "Family support payments" account to the "Administration for Children and Families Program Administration" account. This would allow the Department of Health and Human Services to pay for activities required under law to complete AFDC quality control error rate determinations. While authority exists to withhold the necessary FSPS funds from States, these funds cannot currently be used by the Department of Health and Human Services as required because there is no authority to transfer them to the "Federal program administration" account.

The $76,093,000 recommendation for Federal administration is the same as the fiscal 1991 enacted level.

The Committee recommendation for research and evaluation is $13,735,000, which is $7,235,000 over the budget request and $3,000,000 below the fiscal 1991 appropriation. The Senate recommendation includes $6,500,000 for job creation demonstration activities authorized under section 505 of the Family Support Act of 1988. No funds were included in the budget request for these projects. These grants provide technical and financial assistance to businesses that agree to target new job and enterprise opportunities to welfare recipients and welfare individuals at or below 100 percent of the poverty threshold.

The Committee continues to be concerned over the lack of recent data on the activities conducted by the grantees of community services block grant funds. The Department is urged to enter into a contract to collect and analyze the information for fiscal year 1991 CSBG programs and to accelerate accurate reporting of fiscal year 1992 data required under section 407 section 682.(a)(1) of the Augustus F. Hawkins Human Services Reauthorization Act of 1990, no later than 120 days from the date of enactment of this bill. For the purposes of section 407 section 682.(a)(1), the Department is urged to contract with a private nonprofit organization with a demonstrated ability to successfully develop and implement the collection, analysis, and dissemination of information on the community services block grant on a nationwide basis. The Committee has included $250,000 for these data collection activities.

Since the enactment of the community services block grant in October 1991, comprehensive training and technical assistance for the nearly 1,200 grantees in the program has been virtually nonexistent. The Committee is concerned that continuation of this policy could seriously jeopardize the effectiveness and management capabilities of these local agencies. The Committee has, therefore, included $500,000 to develop and implement a comprehensive training program utilizing organizations that have demonstrated familiarity and expertise nationwide with training and technical assistance needs of community action agencies. The Committee is aware that two such organizations—the Community Action Agency Executive Development Institute and the National Association of Community Action Agencies—have provided training and encourages the Department to give careful consideration to their proposals when awarding grants.

Finally, the Committee recommendation includes bill language extending availability of $400,000 in prior-year appropriations for the Commission on Interstate Child Support. The Commission, established under the authority of section 126 of the Family Support Act of 1988, will terminate its activities by the summer of 1992. It was created to make recommendations to Congress on ways to improve the interstate establishment and enforcement of child support awards and on revisions to the Uniform Reciprocal Enforcement of Support Act [URESA].

SOCIAL SERVICES BLOCK GRANT

Appropriations, 1991	$2,800,000,000
Budget estimate, 1992	2,800,000,000
House allowance	2,800,000,000
Committee recommendation	2,800,000,000

The Committee recommends an appropriation of the full authorization level of $2,800,000,000 for the social services block grant, the same as the administration request, the House allowance, and the fiscal year 1991 level.

Social services block grant funds are used by States to fund a wide variety of social services for the purpose of preventing or reducing dependency and assisting individuals achieve self-sufficiency. Activities include child and adult day care, child and adult abuse and neglect prevention, home-based services, and independent living services. States are entitled to their full share of the appropriated funds and may use these funds to best suit the needs of the individuals residing within the State.

HUMAN DEVELOPMENT SERVICES

Appropriations, 1991	$3,434,410,000
Budget estimate, 1992	3,577,034,000
House allowance	3,508,357,000
Committee recommendation	3,553,828,000

The Committee recommends an appropriation of $3,553,828,000 for human development services, $31,206,000 less than the comparable administration request, $45,471,000 more than the House allowance, and $119,418,000 above the fiscal year 1991 level.

The human development services appropriation consists of programs for children, youth and families, the elderly, the developmentally disabled, and native Americans, as well as Federal administrative costs. Funds for programs administered by the Administration on Aging [AOA], formerly funded under this appropriation account, are included in a new, separate appropriation account to reflect a reorganization at HHS which made AOA a separate operating component of the Office of the Secretary.

Head Start

Head Start provides comprehensive development services for low-income children and their families, emphasizing cognitive and language development, socioemotional development, physical and mental health, and parent involvement to enable each child to develop and function at his or her highest potential. At least 10 percent of enrollment opportunities in each State are made available to children with disabilities.

The Committee recommends $2,201,800,000 for the Head Start Program, $12,000,000 less than the House allowance, $150,000,000 more than the administration request, and an increase of $250,000,000 over the fiscal year 1991 appropriation level.

The Committee directs that the Department, prior to allocating funds for quality improvements (sec. 640(3) of the Head Start Act) and increased enrollment (sec. 640(g)), allocate to each grantee a cost-of-living increase comparable to the percentage change in the

Consumer Price Index for all urban consumers during the prior year as published by the Bureau of Labor Statistics (sec. 640(g)).

In order to assure adequate time for planning and effective utilization of new funds, the Committee expects the Department to issue 1992 funding guidance to individual Head Start programs within 90 days of the beginning of the fiscal year or final passage of the 1992 appropriation.

The Committee has included $2,500,000 in the Head Start research, demonstration, and evaluation function to fund the second year of the 3-year project initiated in fiscal year 1991 to demonstrate the effectiveness of training Head Start teachers through interactive education via satellite technology. The purpose of this demonstration is to create a means that could quickly add into the system, well-trained personnel which are needed for the successful expansion of the Head Start Program. It was the intent of the Committee that these funds would be awarded by the Office of Human Development Services in a timely manner so that training could be available to new teachers prior to the 1991–92 school year with which Head Start generally coincides. The Committee expects that the Department will move more quickly this fiscal year in obligating moneys for interactive education via satellite.

Child development associate scholarships

The Committee also included $1,397,000 for child development associate scholarships, the same level as the budget request, the House allowance, and the fiscal year 1991 appropriation. These funds are used to assist low-income persons obtain certification as a child development associate in preparation for employment in a variety of child care and development agencies, including Head Start programs, day care, and other child care settings.

Comprehensive child development centers

This program is designed to encourage intensive, comprehensive, integrated, and continuous supportive services for low-income children from birth until they reach public school age. These services are intended to enhance the physical, emotional, and intellectual development of these children and to provide support to their parents and other family members. The program targets infants and children from low-income families who, because of health, environmental, or other factors, need intensive and comprehensive support to enhance their growth and development.

The Committee recommends $44,398,000, an increase of $20,000,000 over the the administration request and the fiscal year 1991 appropriation, and $602,000 below the House allowance. With these funds, the Secretary will make operating and planning grants to eligible public and nonprofit agencies, including Head Start agencies, community-based organizations, institutions of higher education, public hospitals, community development organizations, and organizations specializing in the delivery of services to infants or young children.

Child abuse and neglect/family violence

These programs improve and increase activities at all levels of government which identify, prevent, and treat child abuse and neglect through State grants, technical assistance, research, demonstration, and service improvement.

The Committee has included $41,524,000 for child abuse and neglect prevention and treatment, including $21,518,000 for child abuse State grants and $14,639,000 for child abuse discretionary activities. The Committee directs that $750,000 of discretionary funds be dedicated to a request for proposals to establish a national training program for a model comprehensive, community-based child sexual abuse treatment program integrating treatment with self-help. Such a program should include all client populations involved in the problem, and should have the ability to utilize advanced audio and visual technologies, including satellites, to distribute training information to sites nationally. The Barbara Sinatra Center at Eisenhower in Rancho Mirage, CA, would be a strong candidate for funding under this proposal. Also included is $5,367,000 for child abuse challenge grants, consistent with the administration request. The purpose of this program is to encourage States to create and maintain children's trust funds or other funding mechanisms, including direct State appropriations, to support child abuse and neglect prevention activities.

The Committee recommends an appropriation of $19,518,000, the same as the administration request, the fiscal year 1991 appropriation, and the House amount, for emergency child abuse prevention services. This program awards grants to eligible entities to enable them to provide services to children whose parents are substance abusers in order to prevent abuse and neglect.

For programs authorized by the Family Violence Prevention and Treatment Act, the Committee recommends $12,235,000, an increase of $1,500,000 over the budget request, the House allowance, and the fiscal year 1991 appropriation. This program makes formula grants to States and Indian tribes to assist in supporting programs and projects to prevent incidents of family violence and to provide immediate shelter and related assistance for victims of family violence and their dependents.

Abandoned infants assistance

The committee recommends an appropriation of $12,557,000 for abandoned infants assistance, the same as the administration request, the House allowance, and the fiscal year 1991 enacted level.

This program provides financial support to public and private entities to develop, implement, and operate demonstration projects that will prevent the abandonment of infants and young children. Grants provide additional services such as identifying and addressing the needs of abandoned infants, especially those who are drug-exposed or infected with AIDS; providing respite care for families and caregivers; and assisting abandoned infants and children to reside with their natural families or in foster care.

Runaway and homeless youth

This program addresses the crisis needs of runaway and homeless youth and their families through support to local and State governments and private agencies. The Runaway and Homeless Youth Act requires that 90 percent of the funds go to community-based centers allocated to the State jurisdictions on the basis of the

State youth population under 18 years of age in proportion to the national total. The remaining 10 percent funds networking and research and demonstration activities including the National Toll-Free Communications Center.

The Committee provides $36,370,000 for this program, $1,238,000 over the budget request, the fiscal year 1991 appropriation, and the House allowance. With this funding level, over 350 runaway and homeless youth shelters will serve 65,000 youth nationwide.

Transitional living for homeless youth

The committee recommends an appropriation of $12,000,000 for transitional living for homeless youth, an increase of $2,061,000 over the budget request, the fiscal year 1991 enacted level, and the same as the House allowance.

This program awards grants to public and private nonprofit entities to address the shelter and service needs of homeless youth. Grants are used to develop or strengthen community-based programs which assist homeless youth in making a smooth transition to productive adulthood and social self-sufficiency; and to provide technical assistance to transitional living programs for the acquisition and maintenance of resources and services. Funds will be used to provide appropriate living arrangements for youths age 16 to 20 who have no safe shelter.

Dependent care planning and development

This program provides States with funds for activities in two areas. Forty percent of the funds are devoted to the planning, development, and operation of resource and referral systems to provide information concerning the availability of dependent care services. The remaining 60 percent of the funds support before and after school child care services for low-income families.

The committee recommends an appropriation of $13,175,000 for this program, the same level as the administration request, the House allowance, and the fiscal year 1991 appropriation.

Child welfare services

The Committee recommends an appropriation of $273,911,000 for child welfare services, the same level as the administration request, the fiscal year 1991 appropriation, and the House allowance.

This program helps State public welfare agencies improve their child welfare services with the goal of keeping families together. State services include: preventive intervention, so that, if possible, children will not have to be removed from their homes; development of alternative placements like foster care or adoption if children cannot remain at home; and reunification so that children can return home if at all possible. All States are eligible to receive a share of the first $141,000,000 appropriated for child welfare services, and as an incentive to States, only those States implementing the specific protections for children outlined in title IV of the Social Security Act are eligible to receive a share of the appropriation in excess of $141,000,000.

Child welfare training

The Committee recommends $3,559,000 for child welfare training, the same level as the budget request, the fiscal year 1991 enacted level, and the House allowance.

This program provides grants to public and private institutions of higher learning to develop and improve education/training programs for child welfare service providers.

The Committee recognizes the importance of the child welfare training program, particularly in light of the severe shortage of professionally trained social workers currently engaged in child protection and foster care practices. Accordingly, the Committee directs that these funds continue to be used for social work student support and urges that a priority be given to awarding traineeships to minority candidates.

Child welfare research and demonstrations

The Committee recommends an appropriation of $6,652,000 for this effort, the same level as provided in fiscal year 1991, the House allowance, and $1,155,000 below the administration request.

The child welfare research and demonstration funds support research and demonstration activities in four basic areas: child welfare, child care, youth development, and family and child development, with the basic goal of strengthening the family as the primary agent responsible for the developmental needs of children and youth.

The Committee recognizes the importance of assisting children and families of all cultural backgrounds in the Nation. In this respect, Hawaii offers an unique opportunity to define, demonstrate, and implement alternative approaches for developing family strengths for a diverse ethnic population. The Committee expects the Assistant Secretary for Children and Families to direct $500,000 toward the implementation of the University of Hawaii's Center on the Family education demonstration project, which seeks to develop solutions to many social and health-related problems by increasing families' competence to nurture their children's health and development.

The Committee directs that within the amount provided, $150,000 be allocated to the Hopi child sexual abuse project to support child abuse education and prevention efforts.

Adoption opportunities

The Committee recommends $12,687,000 for adoption opportunities, the same as the budget request, the House allowance, and the same level as the fiscal year 1991 appropriation.

This program eliminates barriers to adoption and helps find permanent homes for children who would benefit by adoption, particularly children with special needs. Since the Committee recommendation exceeds $5,000,000, grants for placement of minority children and postlegal adoption services, as well as grants for improving State efforts to increase placement of foster children legally free for adoption, should be made, as required by law. This program also funds the National Adoption Clearinghouse, a national adoption information exchange system.

Temporary child care and crisis nurseries

The Committee has also included $11,055,000 for the Temporary Child Care and Crisis Nurseries Program, the same level as the administration request, the 1991 funding level, and the House allowance.

This program is intended to demonstrate the effectiveness of assisting States to provide temporary nonmedical child care for children with special needs in an effort to alleviate social, emotional, and financial stress among the children and the families of those children; and to provide crisis nurseries for children who are abused and neglected, at risk of abuse and neglect, or in families receiving child protective services.

Youth drug abuse prevention and education

The Committee has provided $15,786,000 for drug education and prevention for runaway and homeless youth, authorized by the Anti-Drug Abuse Act of 1988. This level is $1,000,000 more than the budget request and the fiscal year 1991 appropriation. The House bill contained $14,786,000 for this purpose.

This program makes grants to public and private nonprofit organizations to support family and group counseling, community education, outreach, and drug abuse prevention training to individuals working with runaway and homeless youth.

The Committee also recommends $14,786,000 for the Drug Education and Prevention Program for Youth Gangs, also authorized by the Anti-Drug Abuse Act of 1988. This is the same level as the budget request and the 1991 appropriation, and $7,686,000 more than the House allowance. The purpose of this program is to reduce and prevent the participation of youth gangs in illicit drug activities.

Developmental disabilities

The Committee recommends $115,585,000 for developmental disabilities programs, $13,262,000 over the administration request and the fiscal year 1991 appropriation, and $11,762,000 above the House allowance.

The Administration on Developmental Disabilities supports community-based delivery of services which promote the rights of persons of all ages with developmental disabilities. Developmental disability is defined as a severe, chronic disability attributed to mental or physical impairments manifested before age 22, which causes substantial limitations in major life activities.

Basic State grants

For State grants, the Committee recommends $71,773,000, an increase of $7,364,000 over the budget request, the House allowance, and the fiscal year 1991 funding level. This program provides grants to States to plan and conduct activities that increase the capacities and resources of agencies to develop, coordinate, or stimulate permanent improvement in systems of services for persons with developmental disabilities, with priority given to those persons whose needs are not otherwise met under other health, education, and human service programs.

Protection and advocacy grants

For protection and advocacy grants, the Committee recommends $24,080,000, an increase of $3,098,000 over the budget request, the House allowance, and the fiscal year 1991 appropriation.

This formula grant program provides funds to States to establish protection and advocacy systems to protect the legal and human rights of persons with developmental disabilities who are receiving treatment, services, or rehabilitation within the State.

Projects of national significance

The Committee recommends $3,325,000, an increase of $300,000 over the administration request, the House allowance, and the fiscal year 1991 funding level.

This program funds grants and contracts providing nationwide impact by developing new technologies and applying and demonstrating innovative methods to support the independence, productivity, and integration into the community of persons with developmental disabilities.

University-affiliated programs

This program provides operational and administrative support for a national network of university-affiliated programs and satellite centers. Grants are made annually to university-affiliated programs and satellite centers for interdisciplinary training, exemplary services, technical assistance, and information dissemination activities.

The Committee recommends $16,407,000 for this program, an increase of $2,500,000 over the budget request and the fiscal year 1991 appropriation. The House bill provided $15,407,000 for this purpose. It is the Committee's intent that no more than three new UAP's will be funded with this increase, with the remainder to be obligated for training initiatives selected at the discretion of individual UAP's.

Native American programs

The Administration on Native Americans administers direct financial assistance grants, contracts, and interagency agreements to federally recognized and nonfederally recognized tribes and native American organizations to promote social and economic self-sufficiency.

The Committee recommends $34,376,000 for this program, an increase of $1,000,000 over the budget request, the House allowance, and the fiscal year 1991 appropriation.

The Committee directs that $400,000 be made available to the Devils Lake Sioux Tribe to develop a program that will implement a plan to clean up existing landfills. In addition, funds would be used to develop and plan for required environmental programs.

The Committee has included $1,000,000 to continue the development and organization of the National Center for Native American Studies and Policy Development, a task undertaken under the authority of Public Law 101-301 in late 1990 as a feasibility study by George Washington University under a cooperative agreement with the Administration on Native Americans. This funding would support 10 to 15 demonstration research projects in the fields of Indian education, economic development, natural resources management, cultural rights protection, tribe-State jurisdiction relationships, and self-governance. The Committee feels that maximum flexibility should be provided to the grantee to receive input from Indian tribal governments and Indian specialists in a variety of fields. The administration must not micromanage or restrict the scope of the flexibility of the study process.

The Committee also has included $1,000,000 to expand the resources available to the highly successful native Hawaiian revolving loan fund established in fiscal year 1988. Based on the best available information, the Commitee anticipates that an additional 20 or more loans will be made with the new appropriations and perhaps 80 to 100 jobs will be created. The entire amount would be available for loans, since all administrative expenses are borne by the administering agency.

Social services research

The Committee recommends $12,879,000, $9,000,000 over the administration request, $10,000,000 above the fiscal year 1991 funding level, and $5,000,000 above the House allowance. This program supports activities authorized by section 1110 of the Social Security Act and are used to support cross-cutting research, demonstration, evaluation and dissemination activities, with the goal of reducing dependency and increasing self-sufficiency among the most vulnerable populations. Projects supported include collaboration between health and social service delivery systems for children with pediatric aids, and training family caregivers, and planning for the lifelong services needs of individuals with disabilities and the elderly.

The Committee has provided $9,000,000 under the general legislative authority for this account to support demonstration projects modeled after the family support centers, including the Gateway Program, described in title VII of the McKinney Homeless Assistance Act.

The Committee has provided sufficient funds to continue, at the authorized level, demonstration projects to determine whether the use of volunteer senior aides to provide assistance and support to families with disabled or chronically ill children contributes to reducing the cost of care to such children, as authorized under section 10404 of the Omnibus Budget Reconciliation Act. The funds provided may also be utilized to fund evaluation, coordination, and assistance to local demonstration projects implementing the family friends model.

The Committee has also included $1,000,000 for a program to demonstrate the benefits of decategorization of services on a communitywide basis. The projects should represent a service system that is community-owned and managed and built upon client need. Coordination on behalf of families provides for easy access to services and uncomplicated, flexible collaborations or movements among service agents. Such collaborations can be supported through an intake process that is uniform across entry points, and with information that can be transmitted smoothly and simply from one agency to another. Early intervention and prevention should be emphasized to reduce the likelihood of larger problems or entrenchment of existing problems within families. Pottawattamie County, IA, is a likely candidate for such a demonstration.

The Committee directs that $200,000 be allocated for the establishment and operation of the Federal Council on Children, Youth, and Families as described in section 198 of the Augustus F. Hawkins Human Services Reauthorization Act of 1990.

ADMINISTRATION ON AGING

The Committee recommends an appropriation of $818,603,000 for aging programs, $51,853,000 more than the budget request, the House allowance, and the fiscal year 1991 appropriation.

Supportive services and senior centers

This State formula grant program funds a wide range of social services for the elderly, including multipurpose senior centers and ombudsman activities. State agencies on aging make awards to area agencies on aging on the basis of State-approved area plans and intrastate funding formulas.

The Committee recommends an appropriation of $324,000,000 for supportive services and senior centers, an increase of $33,182,000 above the House allowance. The Committee has included $25,000,000 within the total amount recommended for the expansion of health promotion and disease prevention programs provided to older Americans at congregate meal sites, senior centers, and through the Meals-on-Wheels Program.

There is a great need to increase older Americans' access to, and participation in, health promotion and disease prevention promotion activities. Such services have the potential to improve the health and quality of life of older individuals and to reduce their health care costs. Senior centers and congregate meal programs funded through the Older Americans Act are providing these services, but on a very limited and inconsistent basis. They, along with the meals-on-wheels programs are ideally suited for the provision of these types of programs because so many older people are reached by them each day. Funding should allow for a more regular program of such activities in each area. Health promotion and disease prevention activities to be provided should include: health risk assessments; routine health screenings; nutritional counseling and educational services; health promotion programs, including those aimed at alcohol abuse reduction, smoking cessation, weight loss and control and stress management; group exercise programs; home injury control services; screening for prevention of depression; educational programs on the availability, benefits, and appropriate use of Medicare-covered preventive health services; and counseling regarding followup health services found to be needed based on any of the above services.

The Committee notes services provided with these funds shall not include any for which payment is available through other Government programs and that funds are to be used to supplement, and not replace, existing Government and private resources dedicated to provide these services. Further, the Commissioner of the Administration on Aging is directed to submit a report to the Committee, no later than January 1, 1993. This report will include a summary of reports from each area agency on aging of the health promotion and disease prevention services provided and the number of older individuals served in this fiscal year.

The Committee is deeply concerned about the poor quality of the data collected by the Administration on Aging [AoA]. The current data collection system does not permit an accurate measure of the participation in Older American Act programs. The Committee is particularly concerned about the participation by low-income elders and minority elders. The Committee urges AoA to collect accurate and consistent data nationwide, provide technical assistance, and fund innovative programs in rural and minority communities.

The Committee commends the AoA for its recent efforts to promote minority participation in OAA programs. The Committee urges AoA to continue to provide increased funding for national aging organizations with proven track records in providing representation and services to low-income minority elders.

Ombudsman/elder abuse

The committee recommends an appropriation of $11,367,000 for ombudsman services and elder abuse programs, an increase of $6,000,000 over the administration request, the House allowance, and the fiscal year 1991 enacted level. Of the amounts provided, $5,440,000 is for the ombudsman program. The remaining $5,927,000 is for the prevention of abuse and exploitation of older individuals. This program is authorized under the 1987 Amendments to the Older Americans Act, provides for grants to be awarded to States to carry out programs for the prevention of abuse, neglect, and exploitation of older individuals.

Congregate and home-delivered nutrition services

The Committee recommends an appropriation of $464,831,000 for nutrition services, including $373,000,000 for congregate meals, and $91,831,000 for home-delivered meals. This is an increase of $15,917,000 over the fiscal year 1991 appropriation and the budget request.

This program provides funds for operating and establishing nutrition services projects for the elderly. Projects funded must make home-delivered and congregate meals available at least once a day, 5 days a week, and each meal must meet one-third of the minimum daily dietary requirements.

Federal Council on Aging

The committee recommends an appropriation of $181,000 to support the Federal Council on Aging, the same level as the administration request, the House allowance, and the fiscal year 1991 enacted level.

The Council advises and assists the President on matters relating to the special needs of older Americans and reviews and evaluates Federal policies regarding the aging.

Grants to Indian tribes

The Committee recommends a total of $15,224,000 for title VI grants to Indian tribes and native Hawaiians, an increase of $585,000 over the administration request, the House allowance, and the fiscal year 1991 funding level. In accordance with the distribution of funds mandated by the Older Americans Act, of the amount provided, $13,719,000 will fund part A, grants to Indian tribes, and $1,505,000 will fund part B, grants to native Hawaiians.

The native American elderly population, like the rest of our Nation's elderly population, is expected to continue to rapidly increase in size. It is estimated that the native American elderly population has nearly doubled in the last 10 years. Currently, less than 19 percent of all native Americans are served by title VI nutrition services.

This program promotes the delivery of supportive services, including nutrition services, to American Indians, Alaskan Natives, and native Hawaiians. Part A grants are made to Indian tribes with at least 50 older Indians who are 60 years of age or older, and part B grants are made to public or nonprofit private organizations serving at least 50 older native Hawaiians who are 60 years of age or older.

In-home services for frail elderly

The Committee recommends $7,000,000 for in-home services for the frail elderly, an increase of $169,000 over the administration request, the House allowance, and the fiscal year 1991 appropriation. In-home services include homemaker and home health aides, visiting and telephone reassurance, chore maintenance, in-home respite care for families, and minor home modifications.

Aging research and training

The Committee recommends $25,941,000 for aging research, training, and discretionary programs, the same as the budget request and the House allowance, and $976,000 below the fiscal year 1991 funding level.

The Aging Research, Training and Demonstrations Program supports activities in gerontological career preparation, in-service training, and knowledge transfer and utilization. Projects supported include legal services activities and research projects in the areas of improving community systems for responding to the needs of the elderly and the nature and causes of alcoholism among the elderly.

The Committee urges the AOA to continue to provide funding for national aging organizations with a proven track record in providing representation and services to low-income, aged minorities, and to increase funding for education and training activities to emphasize the need for qualified personnel trained and educated in the field of aging. The Committee recommends that funds continue to be used to recruit more minorities into the field of aging. Further, emphasis should be placed on education and training programs at colleges and universities. The Committee intends that the training and education funds should strengthen the capacity of higher education institutions to provide gerontological training, thereby assuring a long-term commitment to personnel development in the field of aging.

AOA should continue its assessment of short-term and long-range personnel needs in the field of aging. Specific projects should be funded to implement this objective. AOA-sponsored research and training should focus on the behavioral and social aspects of aging, since the National Institute on Aging, the National Institute of Mental Health, and the Bureau of Health Professions are all authorized to fund health-related programs.

The Committee expects that national legal services support and demonstration projects will continue to be funded at a minimum of $1,500,000.

Included within the funding made available for aging research and training is $1,000,000 for demonstration grants under the School-Based Meals and Intergenerational Programs Act. Increasingly, extended family members do not reside in the same locale, let alone in the same household and, as a result, there are fewer opportunities for intergenerational interaction. In order to promote more educational and social interactions among generations, the Committee supports programs, such as the congregate meal programs at school sites created in the School-Based Meals and Intergenerational Programs Act, modeled on the SPICE Program in Seattle, WA, which is expected to be incorporated into this year's reauthorization of the Older Americans Act.

The White House Conference on Aging is an important undertaking and the aging community supports it. The Committee recognizes that $976,000 was appropriated for this purpose in fiscal year 1991 and is, therefore, available to be expended until fiscal year 1992. The Committee recommends that the Department utilize in fiscal year 1992, $1,000,000 from the "Aging research, training, and special projects" (title IV) account, and directs the Department to not use funds from this account that have been identified by the Congress as priority areas. The Committee is concerned about the limited funds available for training, research, and demonstrations, but believes that the Conference is a major event for aging policy in America. In light of this, the Committee will work with the Department to identify other potential sources of funding for the Conference, and will work with the Subcommittee on Aging of the authorizing committee to address the Conference in the Older Americans Act reauthorization.

Program direction

This activity supports Federal staff that administer the programs in the Administration on Children and Families as well as the Administration on Aging. The Committee recommends $79,034,000 for this activity, $5,128,000 over the fiscal year 1991 funding level, and $8,966,000 below the administration request and the House allowance.

PAYMENTS TO STATES FOR FOSTER CARE AND ADOPTION ASSISTANCE

Appropriations, 1991	$2,611,281,000
Budget estimate, 1992	2,614,005,000
House allowance	2,614,005,000
Committee recommendation	2,614,005,000

The Committee recommends an appropriation of $2,614,005,000 for payments to States for foster care and adoption assistance, the same level as the administration's current services estimates and the House allowance, and $2,724,000 above the fiscal year 1991 funding level. Of the total recommended appropriation, $2,223,668,000 would be for fiscal year 1992 foster care claims, $118,476,000 would fund foster care shortfalls in full for fiscal years 1990 and 1991, $201,861,000 would be for adoption assistance, and $70,000,000 would fund the Independent Living Program.

The Committee does not accept the administration's proposal to limit reimbursement for State and local administrative costs associated with the Foster Care Program.

The Foster Care Program provides Federal reimbursement to States for: maintenance payments to families and institutions caring for eligible foster children, matched at the medicaid medical assistance rate for each State; and administration and training costs to pay for the efficient administration of the Foster Care Program, and for the training of foster care workers and parents.

The Adoption Assistance Program provides funds to States to assist in paying maintenance costs and the nonrecurring costs of adoption for children with special needs, with the goal of facilitating the placement of hard-to-place children in permanent adoptive homes, and thus prevent long, inappropriate stays in foster care. As in the Foster Care Program, State administrative and training costs are reimbursed under this program.

DEPARTMENTAL MANAGEMENT

GENERAL DEPARTMENTAL MANAGEMENT

Appropriations, 1991	$78,944,000
Budget estimate, 1992	91,673,000
House allowance	86,673,000
Committee recommendation	79,444,000

The Committee recommends an appropriation of $79,444,000 for general departmental management. This is $12,229,000 less than the administration request, $17,229,000 below the House allowance, and $500,000 above the fiscal year 1991 level.

The Committee also recommends the transfer of $30,350,000 from the Social Security and Medicare trust funds, $651,000 below the administration's request, the same as the fiscal year 1991 amount, and $651,000 less than the House amount.

The general departmental management appropriation supports activities associated with the Secretary's roles as policy officer and general departmental manager, including the areas of public affairs, executive secretariat, legislative services, planning and evaluation, procurement assistance, facilities management, legal services, and policy planning and functional guidance for all departmental operations. The Committee has funded administrative accounts throughout the bill at the fiscal year 1991 level.

The Committee has added $500,000 to continue the human services transportation technical assistance program in fiscal year 1992.

The Committee recognizes the importance of programs targeted to minorities at risk. The Committee is concerned, however, about reports of overlap and a lack of coordination between programs of the Office of Minority Health and CDC's minority AIDS programs. The Committee requests the Secretary to report back regarding coordination of these efforts along with recommendations regarding the integration of these programs under the auspices of one agency.

Living wills.—The Committee recommends the implementation of a public education campaign to increase awareness of advance directives, as required by sections 4206 and 4751 of the Omnibus Budget Reconciliation Act of 1990. The Committee encourages the Secretary to designate the Administration on Aging and the Health Care Financing Administration to implement and coordinate this public education campaign.

The Committee commends the administration for its interest in child survival and AIDS in Sub-Saharan Africa. Infant and child mortality rates in Sub-Saharan Africa remain the highest in the world, where many countries have a mortality rate greater than 100 per 1,000 live births. The Committee is aware that collaborative public health initiatives by the health care professions are crucial to control diarrheal diseases, malaria, acute respiratory diseases, malnutrition, and AIDS. The Committee encourages the Department and the U.S. Agency for International Development to recognize the contributions made to public health by the nursing profession and to include representatives of nursing in future fact-finding delegations. The Committee further encourages the Secretary to give serious consideration to appointing nurses to leadership positions at the World Health Organization.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 1991	$51,918,000
Budget estimate, 1992	63,842,000
House allowance	63,842,000
Committee recommendation	63,842,000

The Committee recommends new budget authority of $63,842,000 for the Office of the Inspector General [OIG], plus a $37,833,000 transfer from the Social Security trust funds for total obligational authority of $101,675,000. This amount is $9,514,000 below the administration's request, the same as the House amount, and $7,088,000 more than the fiscal year 1991 appropriation. The Committee has not allocated funds to implement the Chief Financial Officers Act in fiscal year 1992.

The Office of the Inspector General conducts audits, investigations, and inspections and evaluations of the six operating divisions within the Department of Health and Human Services. The OIG functions with the goal of reducing the incidence of fraud, waste, abuse, and mismanagement, and promoting economy, efficiency, and effectiveness throughout the Department.

Indirect costs.—The Committee is aware that prior to 1966, HEW capped all indirect costs at rates ranging from 8 percent to 20 percent. The Committee is concerned that since 1966, when the system of negotiated indirect cost was first adopted, the average indirect cost rate has increased from 20 percent to near 54 percent.

The Committee is concerned that the administration's proposed indirect cost reforms are inadequate to address the serious abuses that have been documented by the General Accounting Office, the inspector general, and oversight committees of the Congress. Accordingly, the Committee directs the inspector general of the Department of Health and Human Services to undertake a thorough review of indirect costs.

The review should include conducting a series of ongoing audits to ensure that the reform package proposed by the administration is having the intended effect. The Committee requests reports on the status and progress being made every 6 months, with the first report due March 16, 1992.

Additionally, the Committee directs the inspector general to fully examine the consequences and desirability of further reductions in the proposed indirect cost cap. This additional requirement should include an investigation of the need to cap the remaining four categories of indirect costs. The Committee further directs the inspector general to examine whether returning to the system that existed prior to 1966 would be more cost effective.

The Committee directs that the inspector general identify weaknesses in the current negotiated process that have permitted this continuing escalation of the average rate, and recommend changes to better protect the public's money. The Committee requests that the inspector general also examine the differences that exist in the treatment by the various cognizant agencies in the negotiating process and identify the reasons for different treatment of these matters by the various cognizant agencies.

OFFICE FOR CIVIL RIGHTS

Appropriations, 1991	$17,066,000
Budget estimate, 1992	18,524,000
House allowance	18,524,000
Committee recommendation	18,524,000

The Committee recommends $18,524,000 in Federal funds for the Office for Civil Rights [OCR], which is an increase of $1,458,000 from the fiscal year 1991 amount. This amount is the same as the House allowance and the administration request. Also included is authority to spend $4,000,000 from the Social Security trust funds, the same as the request and the House amount, and $96,000 the fiscal year 1991 amount.

OCR is responsible for enforcing civil rights-related statutes in health care and human services programs. To enforce these antidiscrimination statutes, the Office investigates complaints of discrimination, conducts comprehensive reviews of programs to correct discriminatory practices, conducts outreach initiatives, and provides technical assistance to encourage voluntary compliance among health and human services providers and constituency groups.

POLICY RESEARCH

Appropriations, 1991	8,928,000
Budget estimate, 1992	5,037,000
House allowance	5,037,000
Committee recommendation	5,037,000

The Committee recommends an appropriation of $5,037,000 for policy research. This is the same as the administration request and the House allowance and $3,891,000 less than the fiscal year 1991 appropriation.

The policy research program, authorized by section 1110 of the Social Security Act, constitutes one of the Department's principal sources of policy-relevant data and research on income sources of the low-income population; on the impact, effectiveness, and distribution of benefits under existing or proposed programs; and on specific issues that impact upon programs affecting more than one agency within the Department. Policy research is used to analyze issues that cannot be covered in other departmental research programs or under existing evaluation activity.

TITLE III—DEPARTMENT OF EDUCATION

COMPENSATORY EDUCATION FOR THE DISADVANTAGED

Appropriations, 1991 comparable	$6,075,655,000
Budget estimate, 1992	6,224,334,000
House allowance	7,075,750,000
Committee recommendation	6,284,526,000

The Committee recommends an appropriation of $6,284,526,000 for compensatory education for the disadvantaged. This is $60,192,000 more than the administration's request and $208,871,000 more than the fiscal year 1991 comparable appropriation.

Programs financed under this account are authorized under the Elementary and Secondary Education Act [ESEA], as amended by the Hawkins-Stafford Elementary and Secondary School Improvement Amendments of 1988 (Public Law 100–297), and section 418A of the Higher Education Act of 1965 [HEA], as amended. ESEA chapter 1 programs provide financial assistance to State and local educational agencies to meet the special educational needs of educationally disadvantaged children, migrant children, neglected and delinquent children in State institutions, and juveniles in adult correctional institutions. In addition, the Even Start Program supports projects that integrate adult and early childhood education. Funds for each of these programs are allocated on a formula based on the number of eligible children and each State's average perpupil expenditure. The chapter 1 appropriation also supports State administration expenses, evaluation and technical assistance activities, rural educational opportunities, and State program improvement grants.

The High School Equivalency Program [HEP] and College Assistance Migrant Program [CAMP], authorized by section 418 of HEA, provide grants to institutions of higher education to assist migrant and seasonal farmworkers past the age of compulsory school attendance to complete the courses necessary to receive a high school diploma or its equivalent, and to assist migrant students enrolled in their first undergraduate year at a college or university.

Chapter 1 evaluation and technical assistance, rural technical assistance centers, and the HEP and CAMP Programs are current-funded programs with funds available for obligation from October 1, 1991, to September 30, 1992. All other programs in this account are forward funded, with funds appropriated for fiscal year 1991 becoming available for obligation on July 1, 1992, and remaining available through September 30, 1993. These forward-funded programs will generally support projects in the 1992–93 school year.

Grants to local educational agencies

For this program, the Committee recommends an appropriation of $5,751,750,000, which is $194,000,000 more than the comparable fiscal year 1991 level and $75,000,000 more than the administration request. The Committee has included language to permit $100,000,000 of the chapter 1 basic grant funds to be used for America 2000 programs if authorized by December 31, 1991. This is discussed in greater detail in the section of the report entitled "America 2000 Excellence in Education."

Grants made under this activity provide financial assistance to local school districts to support supplementary compensatory education services designed to increase the educational attainment of educationally disadvantaged children to a level appropriate for children of their age.

Approximately 90 percent of the Nation's school districts participate in the chapter 1 program. In 1988–89, the total number of participating students exceeded 5,000,000. Financial assistance flows to school districts by formula, based on a State's average per-pupil expenditure for education and the number of school age children from low-income families. The chapter 1 authorizing statute permits school districts, subject to approval by the State educational agency, to use up to 5 percent of their chapter 1 basic LEA grant funds for innovative district projects. Schoolwide projects to improve the entire educational program of a school are permissible in schools where 75 percent or more of the students come from low-income families. Innovation and schoolwide projects enable districts to address program improvement requirements through effective and creative approaches.

Within the amount provided, $575,175,000 shall be distributed as concentration grants. This is $19,400,000 more than the fiscal year 1991 appropriation and $99,600,000 less than the President's request. Concentration grants are awarded to school districts located in counties with at least 6,500 children from low-income families or a poverty rate of at least 15 percent. Approximately 58 percent of counties nationally receive concentration grants. Because concentration grant funds are used for exactly the same purposes as basic grant funds, districts combine concentration grant funds with their basic [LEA] grant funds in order to provide a single program. The Committee has included bill language to continue the current practice of ensuring that no State receive less than $340,000 in concentration grant funds. This funding floor was included in the Appropriations Act for Fiscal Year 1991. Without this special language, the minimum received would be $250,000 for concentration grant funding.

Capital expenses for private schoolchildren

The Committee recommends a total of $42,108,000 for the Capital Expenses Program. This amount is $6,000,000 more than the administration request and the 1991 appropriation.

Capital expenses funding assists local school districts with the additional capital costs incurred as a result of the Supreme Court's *Felton* decision of 1985 controlling the provision of equitable chapter 1 services to private school students. Funds are allocated to

States based on their proportion of nonpublic school students served under the chapter 1 Basic Grants Program in schoolyear 1984–85. States, in turn, distribute these funds to applicant local education areas based on their needs.

Capital expenses funding may be used by the districts to rent classroom space in neutral sites, rent or purchase mobile vans or mobile expandable vehicles for chapter 1 instruction, or transport private schoolchildren to the place of chapter 1 instruction.

Even Start

For the Even Start Program, the Committee recommends $54,500,000, $4,729,000 more than the 1991 appropriation.

The Even Start Program provides grants to eligible school districts to operate unified educational programs of early childhood education and adult education for those parents of children under 7 years of age who live in chapter 1 eligible school attendance areas.

Of the funds appropriated, 3 percent must support migrant Even Start Programs; a small additional amount is set aside for program evaluation activities. The remainder is awarded directly to local education agencies. The authorizing statute requires an equitable distribution of funds between rural and urban areas. The level of Federal support of each project decreases by 10 percent each year, from 90 percent of a project's total cost in the first year, to 60 percent in its fourth and any subsequent year's cost.

State agency programs

For the State agency migrant program, the Committee provides $294,596,000, which is the same as the 1991 level. The amount provided is the same as the administration request. The chapter 1 migrant program authorizes grants to State educational agencies for programs to meet the special educational needs of the children of migrant agricultural workers and fishermen. Funds are allocated to the States through a statutory formula based on the number of full-time equivalent migrant students age 3 through 21 residing in each State and the State's per-pupil expenditures.

Eligible student population counts for this program are determined by the migrant student record transfer system [MSRTS], which also provides centralized storage of migrant students' school and health records. Funds provided for this program also support the administrative costs of MSRTS as well as inter- and intra-State coordination activities.

The Committee recommends $36,108,000 for the neglected and delinquent program. This amount is the same as the fiscal year 1991 comparable level. This program provides financial assistance to State educational agencies for special educational services to neglected and delinquent children in State-run institutions and community day school programs, as well as juveniles in adult correctional institutions.

States are authorized to set aside up to 10 percent of their neglected and delinquent funds to help students in State-operated institutions make the transition into locally operated programs. Designed to address the high failure and dropout rate of institutionalized students, these transition activities could support alternative classes, counseling and supervisory services, or State-supported group homes.

For 1992, the administration proposed that the State agency handicapped program be funded in the "Special education" account in order to consolidate into one account all programs targeted on children with disabilities. The Committee has concurred in their recommendation.

State administration

The Committee provides $59,140,000 for State administration, the same as the comparable 1991 level. These funds enable State educational agencies to meet their administrative responsibilities under the chapter 1 local educational agency program and the State agency programs. These responsibilities include the provision of technical assistance to improve program quality at the local level and to work with LEA's to refine and develop standards for program effectiveness. The Committee has included language, as was done in the 1991 appropriations bill, to ensure that no State receive less than $375,000 for State administration. The statute provides for a State minimum of $325,000. The statutory minimum for the outlying areas is $50,000.

State program improvement grants

For State program improvement grants, the Committee recommends $18,000,000, $12,000,000 less than the administration's request and $3,215,000 more than the comparable 1991 appropriation.

Funds for this activity support the State educational agencies in their statutorily mandated efforts to help local school districts improve the quality of chapter 1 projects that have been ineffective over a period of time in improving the academic performance of students served by chapter 1 programs. In such instances, States are required to develop joint improvement plans with local educational agencies. Funds provided for program improvement grants are used for direct educational services to implement the program improvement plans.

Evaluation and technical assistance

The Committee recommends $13,175,000 for evaluation and technical assistance activities. This amount is the same as the fiscal year 1991 comparable appropriation.

Authorized activities under this program include Federal evaluations, technical assistance (chapter 1 technical assistance centers), research, and data analysis. Activities which will be supported by this funding include the fourth year of the mandated 10-year longitudinal study of chapter 1 students, intensive examination of schoolwide projects, studies for the new national assessment of chapter 1, and analyses of program achievement and participation data gathered from the LEA grant and State agency programs.

Rural educational opportunities

The Committee recommends $5,000,000 for the rural educational opportunities program, $537,000 more than the fiscal year 1991 comparable appropriation. Funds support 10 rural assistance centers which provide technical assistance to improve chapter 1 educational services at small or rural schools. The rural assistance centers coordinate with regular chapter 1 technical assistance centers in order to avoid duplication of efforts, and focus on those particular needs and problems of rural chapter 1 programs, such as resource and management skills sharing and declining enrollments.

High School Equivalency Program and College Assistance Migrant Program

For the High School Equivalency Program [HEP], the Committee provides $8,119,000, $312,000 more than the fiscal year 1991 comparable level.

The High School Equivalency Program supports 3-year grants to provide the outreach, teaching, counseling, and placement services necessary to recruit and serve eligible migrant dropouts who wish to obtain a high school equivalency certificate and subsequently, seek admittance to a postsecondary institution or a job-training program, seek employment, or join the military.

For the College Assistance Migrant Program [CAMP], the Committee provides $2,030,000, $78,000 more than the fiscal year 1991 comparable level.

The College Assistance Migrant Program helps migrant and seasonal farmworkers enrolled as first-year undergraduates to make the transition from secondary to postsecondary education and to complete their first year of college. Participants receive tuition scholarships as well as tutoring and counseling services.

The authorizing statute sets a minimum of $150,000 for each HEP and CAMP grant award.

IMPACT AID

Appropriations, 1991	$780,720,000
Budget estimate, 1992	620,130,000
House allowance	764,756,000
Committee recommendation	769,708,000

The Committee recommends an appropriation of $769,708,000 for impact aid, which is $149,578,000 more than the administration's request and $4,952,000 more than the House allowance. Because responsibility for funding disaster assistance (sec. 7) in fiscal year 1992 has been shifted to the Federal Emergency Management Agency, the Committee's recommendation for impact aid is less than the fiscal year 1991 appropriation.

Impact aid helps to compensate school districts for the costs of educating children when enrollments and the availability of revenues from local sources have been adversely affected by the presence of Federal activities. Included in this program are: payments for "a" children; payments for "b" children; payments for Federal property (sec. 2); construction; and payments to school districts who are experiencing the closing of military bases. During the current school year, payments are being made to about 2,600 school districts which have reported slightly more than 1,800,000 eligible children. All programs in this account, with the exception of disaster assistance and construction, are current funded, with funds available for obligation from October 1 to September 30. Disaster assistance and construction funding remain available until expended.

The Committee received requests from several Senators concerning the effect of the current impact aid formula on payments to their individual districts. While the Committee believes that there is merit to the concerns raised, it has not included bill language affecting the formula. The impact aid program will be reauthorized next year, and the Committee believes that the concerns raised are best addressed by the authorizing committees during that process.

In particular, the Committee encourages the Committee on Labor and Human Resources to consider adjustments to the formula that would allow payment of full entitlement to those districts whose local contribution rates are established under 34 CFR 222.33(c). These districts, for instance those in South Dakota, are over 50 percent federally impacted and receive minimal assistance from their local governments. They are located in some of the country's poorest counties.

In addition, the Committee recognizes the special hardships faced by districts, such as in Bryan County, GA, that are completely bisected by military installations. Because it is not possible to bus children through military installations, bisected districts must operate two separate school systems on either side of the military base, at significant additional expenses. The Committee encourages the Committee on Labor and Human Resources to consider the additional expense incurred by these districts in operating separate school systems when it develops its reauthorization bill for the impact aid program.

The Committee is further concerned about the phasedown of transitional assistance for school districts such as Portsmouth, NH, experiencing a decline in federally connected students because of a decrease in Federal activities, such as the closing of a military base. The Committee requests that the authorizing committee address the special needs of these districts in relation to transitional services when it proposes its reauthorization legislation.

The Committee also requests that the authorizing committee consider the special circumstances of the Winona R-III School District in Winona, MO—in particular, the unique difficulties the district faces in complying with the requirements of section 14(c).

Finally, the Committee is concerned that the Pennsylvania School District of Hatboro Horsham has yet to receive all of its fiscal year 1989 section 2 payments or any of the preliminary payments for fiscal year 1991. The Committee urges the Department to provide these funds to the school district on an expedited basis.

Maintenance and operations

Of the amount provided for impact aid programs, $743,708,000 is available for maintenance and operations under Public Law 81-874, $3,000,000 more than the fiscal year 1991 appropriation, $138,578,000 more than the administration's request, and $4,952,000 more than the House allowance.

Category "a" payments are for those who reside on and whose parents work on Federal property or are on active duty in the uniformed services. Also in category "a" are children residing on Indian lands or in federally subsidized low-rent housing. The Committee recommends $588,540,000 for payments made on behalf of "a" children. This amount is $3,000,000 more than the fiscal year 1991 appropriation and the House allowance, and the same as the administration's request.

The authorizing statute, as amended in 1988, maintains a three-tiered formula for section 3(a) payments, the same system that has been utilized since 1987, in which higher rates of payment are provided to districts with higher proportions of federally connected children. "Super a" school districts are those in which "a" children represent 20 percent or more of average daily attendance. In "sub-super a" districts, "a" children represent at least 15 percent but less than 20 percent of the average daily attendance; and in "regular a" school districts, "a" children represent less than 15 percent of the average daily attendance. The authorizing statute also provides for a hold-harmless payment for section 3(a) districts and stipulates that payments made on behalf of "a" children residing in federally subsidized low-rent housing be made at the same rate as other "a" children.

Section 3(d)(2)(B) payments compensate several of the Nation's most heavily impacted school districts for reduced revenues as a result of Federal activity. The supplemental payments are authorized, to the extent necessary, to enable eligible districts to provide educational services at a level equivalent to that provided by comparable districts in their States.

Category "b" children are those who reside on, or whose parents work on, Federal property or are on active duty in the uniformed services. A total of $136,626,000 is provided for category "b" payments, the same as the fiscal year 1991 appropriation and the House allowance. The administration did not request funds for category "b" children.

The authorizing statute mandates a two-tiered formula for section 3(b) payments. The formula sets different payment rates for school districts in which "b" children represent 20 percent or more of the total average daily attendance ("super b" districts) and districts in which "b" children represent less than 20 percent of total average daily attendance ("regular b" districts). The statute also provides for a hold-harmless payment at the 1987 level for districts in which "b" children represent 20 percent or more of the total average daily attendance.

The Committee recommends an appropriation of $16,590,000 for section 2 payments, which is the same as the fiscal year 1991 appropriation, the administration's request, and the House allowance. Section 2 payments are made to local school districts that have a partial loss of tax base (10 percent or more of assessed value at the time of acquisition) as a result of the Federal Government's acquisition of property. Payments are not tied to the presence of federally connected children in the district.

The Committee has included $1,952,000 for section 3(e) payments, which is the same as the fiscal year 1991 appropriation. Neither the administration nor the House provided funds for this program. Section 3(e) authorizes phaseout funding under specified conditions, such as military base closures, to school districts that lose a substantial number of children due to a decrease or cessation of Federal activities in their State.

The Committee has approved language proposed in the budget to base section 3 payments on prior-year enrollment data in order to expedite the distribution of funds to school districts.

Disaster assistance

The Committee bill does not include funding for disaster assistance payments in 1992. The appropriation for these payments totaled $13,663,000 in 1991. The Committee action is based on the decision of the administration to transfer responsibility for this program to the Federal Emergency Management Agency. The Committee agrees that such a transfer would facilitate a more coordinated effort to deal with disasters.

Construction

The Committee has included $26,000,000 for construction, which is $349,000 less than the fiscal year 1991 appropriation, $11,000,000 more than the administration's request, and the same as the House allowance.

Construction activities provide grants to school districts or support direct Federal activities to repair and construct urgently needed minimum school facilities in school districts where the enrollment and the availability of local revenues have been adversely affected by Federal activities. Funds provided by the Committee for 1991 will support awards under sections 5, 10, and 14 of Public Law 81–815. Section 5 supports awards to districts experiencing an increase in Federal activity; section 10 supports awards to districts where State or local funds are prohibited from being expended on federally connected children; and section 14 grants go to districts comprised mainly of Indian lands or which provide educational services to children residing on Indian lands, and to districts composed mainly of Federal lands with inadequately housed pupils.

SCHOOL IMPROVEMENT PROGRAMS

Appropriations, 1991 comparable	$1,484,306,000
Budget estimate, 1992	1,500,528,000
House allowance	1,577,618,000
Committee recommendation	1,586,595,000

The Committee recommends an appropriation of $1,586,595,000 for school improvement programs. This amount is $86,067,000 more than the administration's request and $102,289,000 more than the fiscal year 1991 comparable appropriation.

This account includes the chapter 2 State block grant program, the drug-free schools and communities programs, the Eisenhower mathematics and science education State grant program, and a variety of other categorical programs that address national concerns or special educational needs.

State block grants

The Committee recommends $450,000,000 for the State block grant program. This amount is $110,000 more than the fiscal year 1991 comparable appropriation. The President requested $448,914,000.

The chapter 2 State block grant program provides grants to State educational agencies [SEA's] to improve elementary and secondary education for students in public and private schools. Under current law, of the funds provided to the SEA's, 80 percent of each State's total allocation must be passed through to local educational agencies [LEA's]. Chapter 2 funds may be used for the acquisition of educational materials, including classroom and library books; the training and professional development of teachers, counselors, administrators, and school board members; the financing of programs to meet the educational needs of students at risk of failure or for whom providing an education entails higher than average costs; and financing innovative programs designed to carry out schoolwide improvements, enhance the educational program and climate of the school or enhance personal excellence in students or student achievement. LEA's have complete discretion in distributing funds among the variety of permissible activities.

National programs

For the inexpensive book distribution program, the Committee provides $10,000,000, which is the same as the House allowance and $729,000 more than the administration request. This program supports the Reading is Fundamental [RIF] Program by distributing books to children from low-income families to help motivate them to read. In 1990, through this program, more than 6.6 million books were distributed to 2.1 million children. This program has been successful in motivating children to read, increasing the use of libraries, increasing parental involvement in schools, and contributing to improved reading achievement.

For the arts in education program, the Committee provides $8,600,000, an increase of $4,208,000 more than the administration request and the comparable amount for 1991. The amount provided will support an award to the very special arts program, which supports the development of quality programs to integrate the arts into the lives of disabled children and adults. A second award will be given to the John F. Kennedy Center for the Performing Arts to support the Kennedy Center Education Department and national programs. The increase of $4,208,000 includes a one-time appropriation to allow the program's grantees, the Kennedy Center and very special arts, to change funding cycles. To facilitate the efficient management of their programs, from fiscal year 1993 on, the grantees should receive their awards on July 1. The fiscal year 1992 increase is needed to provide funding for the 9-month period between October 1, 1991, the former award date, and July 1, 1992, the new award date. This one-time addition of funds would allow the two grantees to be placed on a funding schedule under which they will have adequate notice of the size of their grants and can plan activities accordingly.

The law-related education program promotes efforts to educate individuals about law, the legal process, the legal system, and the principles and values on which these are based. For this purpose, $9,800,000 is provided, $3,945,000 more than the fiscal year 1991 appropriation. The administration did not request funding for this program.

Of the amount provided, the Committee recommends $3,800,000 for "We the People * * * the Citizen and the Constitution," a program authorized under the Education Council Act of 1991. In prior years, a similar program was funded as an activity of the Commission on the Bicentennial of the U.S. Constitution. This program provides a course of instruction on the basic principles of our constitutional democracy and the history of the Constitution and Bill of Rights. Funds are to be used to continue and expand the educational activities of the National Bicentennial Competition on the Constitution and Bill of Rights.

The Committee is aware of the educational programs for deaf and hard of hearing students sponsored by the National Institute for Citizen Education, and encourages the Department to give consideration to funding this program in fiscal year 1992.

Drug-free schools and communities

The Committee provides $635,603,000 for programs authorized by the Drug-Free Schools and Communities Act. This amount is $4,085,000 more than the administration request. The aim of the drug-free schools and communities programs is to bring the Nation closer to the goal of a drug-free generation and a drug-free society.

State grants.—Within the total provided, $517,617,000 is recommended for State grants, $19,908,000 more than the fiscal year 1991 level and the President's request.

The drug-free schools and communities State grants program distributes funds to the States on the basis of population aged 5 to 17 and chapter 1 funding. State and local educational agencies (SEA's and LEA's) receive at least 70 percent of each State's grant. The SEA may retain up to 10 percent of its allocation for statewide programs and administrative costs; the remaining 90 percent is passed through to LEA's. The remainder of each State's grant is under the control of the Governor's office. Each Governor must spend their allocation as follows: at least 42.5 percent for awards to public and private nonprofit entities for community-based programs for high-risk youth; 42.5 percent for awards to public or nonprofit entities for the development and implementation of other drug education and prevention programs; 10 percent for grants to LEA's for drug abuse resistance education [DARE] programs that include classroom instruction by uniformed police officers; and 5 percent for grants to LEA's to expand or replicate successful drug eduction programs. Every 2 years, each State must report to the Secretary of Education describing the drug and alcohol problem in the schools of the State, the types of services provided, and the populations served with assistance from this program.

School personnel training.—The Committee provides $24,331,000 for school personnel training grants, $936,000 more than the fiscal year 1991 comparable level. The drug-free schools and communities school personnel training program awards competitive grants to establish, expand, or enhance programs and activities for the training of teachers, administrators, and other personnel concerning drug and alcohol abuse education and prevention. Two separate programs are authorized: one for training all categories of school personnel and one for training counselors, social workers, psychologists, and nurses only.

National programs.—For drug-free schools national programs, the Committee has provided $63,351,000, $2,437,000 more than the 1991 level. This program authorizes discretionary grants and contracts for a variety of programs designed to combat drug use in schools and communities, primarily through education and prevention activities. Funds are currently used for programs for students in institutions of higher education [IHE's], grants to IHE's for demonstration projects, programs for Indian youth, programs for Hawaiian natives, and Federal activities. Funds also support five regional centers for drug-free schools. The regional centers are charged with assisting State and local educational agencies and colleges and universities in developing and evaluating drug prevention programs. The administration's request included no funds for separate programs for Hawaiian natives. The Committee, however, has included funding for the Hawaiian natives as authorized by law.

The Committee is impressed with the Smoother Sailing Program in Des Moines, IA, which has funded additional counselors in schools with high proportions of at-risk children. The experience of this program has demonstrated that not only do children make better grades, but they do stay off drugs as a result of the additional counseling services. The Committee expects that $2,000,000 of the additional funds provided for National activities be used for a grant competition to support projects in local educational agencies that demonstrate the use of counseling and outreach services in deterring high-risk youth from using drugs.

Emergency grants.—The Committee provides $30,304,000 for emergency grants, $5,304,000 more than the House allowance. The emergency grant program provides competitive grants to school systems that demonstrate significant need for additional assistance in combating drug and alcohol abuse to develop and implement comprehensive approaches to achieving solutions to their drug problems. To be eligible for an emergency grant, a school district must have a significant number or concentration of chapter 1 children and serve an area having: (1) a large number or high percentage of drug- or alcohol-related crimes; (2) a large number of referrals to drug and alcohol treatment centers; and (3) a significant alcohol and drug abuse problem. School officials have great freedom to develop programs that provide a wide range of services appropriate to the needs of their districts.

Eisenhower mathematics and science education

The Committee provides $240,000,000 for the Eisenhower mathematics and science education State grant program, $37,989,000 more than the fiscal year 1991 comparable level.

These funds provide financial assistance to State and local educational agencies (SEA's and LEA's) and institutions of higher education to strengthen the economic competitiveness and national security of the United States by improving the skills of teachers and the quality of instruction in mathematics and science. Under the State grant program, 50 percent of the funding is distributed to the States according to the relative number of children aged 5 to 17, and 50 percent is distributed based on each State's share of the previous year's chapter 1 LEA grant allocation. Each State must spend 75 percent of its grant for elementary and secondary programs and 25 percent for higher education programs. Of the State's funds for elementary and secondary programs, at least 90 percent must be distributed to LEA's. Of this amount, 50 percent is allocated based on relative school enrollments and 50 percent is allocated based on chapter 1 poverty criteria. Each State must use a minimum of 5 percent of its funds for demonstration and exemplary programs for teacher training, instructional equipment and materials, programs for historically underrepresented and underserved persons, or programs serving gifted and talented students. Additionally, each State may use up to 5 percent of its funds or $20,000, whichever amount is greater, for technical assistance, administration, and evaluation. Each State must use a minimum of 95 percent of its higher education funding for competitive grants to postsecondary institutions and may use no more than 5 percent for assessment, administration, and evaluation activities.

The Nation's future economic prosperity depends upon the mathematical and scientific expertise of its people. The Committee believes that the Eisenhower mathematics and science program can be important in reaching that goal.

Christa McAuliffe fellowships

The Committee recommends $2,000,000 for the Christa McAuliffe Fellowship Program, $36,000 less than the fiscal year 1992 budget request and the same as the House allowance. This program is designed to reward excellence in teaching by providing fellowships to help talented public and private school teachers upgrade their teaching skills. Christa McAuliffe fellows in each State are selected by a panel that establishes the operating procedures for the State's program, disseminates information and application materials, and evaluates the proposals from applicants. Program funds are distributed in proportion to the number of public school teachers in each State and territory. However, each State and territory receives at least the national average salary for public school teachers which is also the maximum amount authorized for each fellowship. The fellowships provide funds for study or research sabbaticals, development of innovative programs, staff development, model teacher programs, or consultation with other schools or institutions.

Magnet schools assistance

For the magnet schools assistance program, the Committee has provided $110,000,000, which is $23,000 more than the fiscal year 1991 comparable level. This program supports grants to LEA's for use in magnet schools that are part of an approved desegregation plan and are designed to attract substantial numbers of students of different social, economic, ethnic, and racial backgrounds. Funds may be used for teacher salaries; purchase of books, materials, and equipment; and planning and promotional activities in order to improve academic instruction and vocational skills. Programs must be geared to the improvement of students' knowledge of mathematics, science, history, English, foreign languages, art, music, or vocational skills. The maximum amount an eligible LEA may receive is $4,000,000 annually. Funds provided for fiscal year 1992 will support second-year awards to the 1991 grantees.

Education for homeless children and youth

The Committee recommends an appropriation of $25,000,000 to carry out education activities authorized by the Stewart B. McKinney Homeless Assistance Act. The amount provided is $17,687,000 more than the fiscal year 1991 comparable level. The administration did not request funding for this program under this account because support for the education of homeless children and youth would be provided through a proposed consolidated program for the homeless to be administered by the Department of Housing and Urban Development. The Committee does not concur with this proposed consolidation and has funded the program. This program provides assistance to each State to support an office of the coordinator of education for homeless children and youth, to develop and implement State plans for educating homeless children, and to carry out other activities to ensure that all homeless children and youth in the State have access to a free, appropriate public education. Additionally, recent McKinney Act amendments allow States to provide services to enable homeless children to enroll in, attend, and achieve success in school; develop and implement programs designed to heighten awareness of specific problems faced by homeless children; and provide grants to local education agencies.

Women's educational equity

The Committee has provided $500,000 for the Women's Educational Equity Act [WEEA] program. This amount is $1,495,000 less than the 1991 comparable appropriation. The WEEA program provides grants and contracts to public and private nonprofit organizations and individuals to develop educational materials and projects to promote educational equity for women and girls. A national publishing center, under contract to the Department, publishes and markets products developed by the grantees. The administration requested $500,000 for the WEEA program, all of which would to be used to support the national publishing center.

Training and advisory services

For training and advisory services authorized by title IV of the Civil Rights Act, the Committee has provided $22,000,000. This is the same as the House allowance and $671,000 less than the budget request. This program provides grants to 10 regional desegregation assistance centers and to 53 civil rights units in State education agencies to enable them to assist school districts to address problems associated with desegregation on the basis of race, sex, and national origin.

Dropout prevention demonstrations

The Committee has provided $35,427,000 for the dropout prevention demonstration program. The amount provided is $1,363,000 more than the 1991 comparable level. This program provides grants to local education agencies [LEA's], community-based organizations [CBO's], and education partnerships to support demonstration projects to reduce the number of students who drop out of elementary and secondary schools. Of the funds appropriated for this program, 25 percent must go to LEA's enrolling over 100,000 students, 40 percent to LEA's enrolling between 20,000 and 100,000 students, 30 percent to LEA's with less than 20,000 students, and 5 percent to CBO's.

Funds for this program will be used to support the second year of four planned years of funding for structured demonstration projects begun in 1991. For 1992, the Federal share of the project costs will decline from 90 percent for the first-year projects to 75 percent for the second-year projects. Dropout prevention funds also support a national evaluation of the program. In view of the success of this program and the importance of its purpose, the Committee has supported a program expansion.

General assistance to the Virgin Islands

The Committee has provided $4,500,000 for general assistance to the Virgin Islands, which is the same as the House allowance. Under this program, funds are provided to the Virgin Islands to improve elementary and secondary education and have been used primarily to renovate and construct additions to existing school buildings. Funds may also be used to correct asbestos and other school building deficiencies.

Ellender fellowships

For Ellender fellowships, the Committee has provided $4,500,000, $399,000 more than the fiscal year 1991 level.

The administration did not request funding for this program. Through this program, funds are awarded to the Close Up Foundation of Washington, DC, to make fellowships available to low-income students and their teachers to enable them to participate in the Close Up Foundation's program. The students spend 1 week in Washington, DC, attending seminars on current events and meeting with representatives from the three branches of Government. The Close Up Foundation also sponsors a similar fellowship program for older Americans and recent immigrants. No funds are authorized for the program for older Americans and recent immigrants unless at least $2,964,000 is provided for fellowships for students and teachers.

Follow Through

The Committee provides $7,265,000 for Follow Through. This amount is the same as the fiscal year 1991 comparable appropriation. The administration did not request funds for Follow Through. The intent of the program is to sustain the gains made by preschool children through the Head Start Program. Follow Through grants are awarded to local education agencies and to sponsors which are universities or research organizations with models for early childhood education. The recent reauthorization of the program requires that 70 percent of the programs funds be used for direct services and 30 percent be for research and technical assistance. The reauthorization also strengthened coordination requirements and established a national clearinghouse to disseminate information on the program.

Education for native Hawaiians

For programs for the education of native Hawaiians, the Committee provides $6,400,000, $34,000 more than the fiscal year 1991 comparable level. The administration did not request funding for these programs. The programs include a model curriculum implementation project, family-based education centers, a higher education demonstration program, a gifted and talented demonstration program, and a demonstration program to provide special education services to native Hawaiian children.

The Committee intends that funds should be allocated as follows: $450,000 for the model curriculum implementation project; $3,300,000 for the family-based education centers; $1,250,000 for the Higher Education Program; $950,000 for the Gifted and Talented Program; and $450,000 for the Special Education Program. Although native Hawaiians continue to have unacceptable educational statistics, the Committee feels that these programs are making a significant difference. The Committee further recommends that the Gifted and Talented Program work closely with Kamehameha Schools/Bishop Estate to establish a model curriculum center for ancient polynesian voyaging and 21st century space exploration programs.

Foreign language assistance

The Committee has included $12,000,000 for the foreign language assistance program authorized under the Foreign Language Assistance Act of 1988. In the United States, instruction is seldom offered in certain major languages such as Japanese, Russian, Arabic, Chinese, and Korean—languages that are spoken by three-fourths of the world's population, including some major United States trading partners. Language instruction is generally given too late in the educational process to enable students to become proficient. As most studies point out, a truly effective language training program must begin in the elementary grades and continue throughout the formal education process. Therefore, the Committee directs the Department to use the funds provided for language studies in the elementary grades with the primary focus on the less commonly taught languages such as Japanese, Chinese, Russian, Arabic, and Korean.

National writing project

The Committee is pleased that the President has signed S. 64, which authorizes a grant to be made by the Secretary to the national writing project. The national writing project is a teacher enrichment program for teachers of all disciplines designed to help improve their skills in the teaching of writing. Currently, there are 144 national writing projects programs in 44 States, offering intensive summer workshops and school year inservice training. Each is a collaborative effort with a postsecondary institution. Federal funds are provided on a matching basis, up to $40,000 per site and $200,000 for statewide programs. The sum of $1,952,000 was provided by the conference committee in fiscal year 1991 for this purpose, pending enactment of authorizing legislation. The Committee has provided $3,000,000 for the national writing project in fiscal year 1992, to be made available on July 1, 1992.

AMERICA 2000 EXCELLENCE IN EDUCATION

Appropriations, 1991	....
Budget estimate, 1992	$690,000,000
House allowance	500,000,000
Committee recommendation	325,000,000

On June 7, the President sent to the Congress a set of budget amendments to provide financing for certain elements of his America 2000 education reform strategy. This strategy is the President's proposal for achieving the national education goals by the year 2000.

The America 2000 plan, as requested, would fund several education reform and improvement activities including the development of new educational standards and a system of American achievement tests; provide training for teachers and principals; provide financial rewards for and demonstrate implementation of parental choice programs; help to develop the new American schools; and support various adult literacy initiatives.

The Committee has heard the testimony of the Secretary on the proposal and is well impressed that the proposal includes several useful and important new proposals. The Committee, however, is reluctant to provide appropriations for the new program unless it is fully authorized by the traditional committee process. The Committee has made $100,000,000 of chapter 1 basic grant funds available for the program if authorized by December 31, 1991. If the program is authorized by that date, the funds would be available upon the approval of the House and Senate Committees on Appropriations of a plan submitted by the Secretary as to how specifically the funds would be allocated among the various America 2000 programs. If the program is not authorized by that date, the $100,000,000 of chapter 1 basic grants would remain available for the chapter 1 program. If the program is authorized subsequent to December 31, the Committee would intend to consider funding through the supplemental process.

The Committee has redirected $325,000,000 of the requested funds to authorized programs, including $250,000,000 for the Head Start Program, $55,000,000 for the community health centers program, and $20,000,000 for the comprehensive child development centers program. The Committee believes that these programs support the educational reform efforts by strongly supporting the first educational goal of having all children start school ready to learn by the year 2000.

BILINGUAL AND IMMIGRANT EDUCATION

Appropriations, 1991	$198,014,000
Budget estimate, 1992	200,789,000
House allowance	249,000,000
Committee recommendation	201,814,000

The Committee recommends an appropriation of $201,814,000 for bilingual and immigrant education. This is $3,800,000 more than the fiscal year 1991 comparable appropriation, $1,025,000 more than the administration's request, and $47,186,000 less than the House allowance. Federal bilingual education programs are designed to meet the educational needs of students of limited English proficiency to enable them to achieve full competence in English and to meet promotion and graduation requirements.

Bilingual education

The Committee recommends $123,814,000 for bilingual programs, $2,775,000 more than the fiscal year 1991 appropriation, the same as the administration's request, and $47,186,000 less than the House allowance.

Discretionary grants are made primarily to local school districts to help them build their capacity to provide appropriate educational services to limited English-proficient students. Programs are designed to teach English and to help these students enter all-English educational programs as quickly as possible. Up to 25 percent of this appropriation may be spent by local school districts for special alternative instructional projects that need not use the native language. Projects for academic excellence are also funded to disseminate information on exemplary programs serving these students.

The Committee expects the Secretary to continue to allocate funds provided under part A to activities exclusively designed to teach English to limited English-proficient students and to assist them in meeting grade promotion and graduation standards.

Support services

The Committee recommends $12,000,000 for support services, $368,000 more than the fiscal year 1991 appropriation and the administration's request and the same as the House allowance.

Activities include grants to State education agencies for data collection and improvement of educational services within the State; contracts for evaluation assistance centers to provide technical assistance to local school districts in evaluating local projects and in identifying the educational needs and competencies of limited English-proficient students; contracts for research and evaluation studies to assess the effectiveness of program activities and the different instructional methods used; and a national clearinghouse to collect, analyze, and disseminate information about programs for limited English-proficient students.

Training grants

The Committee recommends $36,000,000 for training grants, $66,000 less than the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance.

Training and technical assistance activities are intended to increase the pool of trained teachers and to strengthen the skills of teachers currently providing instruction to limited English proficient students. Activities include grants to institutions of higher education, State and local educational agencies, and private, nonprofit organizations to train teachers, other educational personnel, and parents; and grants to institutions of higher education to encourage reform, innovation, and improvement, such as the development of new teacher training curriculum. Grants are also awarded to graduate students for fellowships in bilingual education-related fields at participating institutions of higher education. The amount provided is expected to support approximately 500 graduate-level fellowships. Contracts are awarded for multifunctional resource centers to provide in-service training and technical assistance to educational personnel and parents participating in instructional programs for limited English-proficient students.

Immigrant education

The Committee recommends $30,000,000 for immigrant education, $723,000 more than the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance. This program provides grants to States with school districts enrolling substantial numbers of recent immigrant children. Awards are used to help cover the cost of providing supplementary educational services to these students. The State grant funds are allocated to school districts enrolling a minimum of 500 such students or where immigrant children represent at least 3 percent of the enrollment.

SPECIAL EDUCATION

Appropriations, 1991	$2,616,307,000
Budget estimate, 1992	2,729,853,000
House allowance	2,822,676,000
Committee recommendation	2,860,756,000

The Committee recommends an appropriation of $2,860,756,000 for programs authorized by the Individuals with Disabilities Education Act. This is $130,903,000 more than the administration's request and $244,449,000 more than the fiscal year 1991 appropriation. The Committee recommendation is $38,080,000 more than the House allowance.

Programs authorized under the Individuals with Disabilities Education Act provide assistance to ensure that all children with disabilities have access to a free appropriate public education, and that all infants and toddlers with disabilities have access to early intervention services. This assistance is provided through State grants which offset a portion of the costs incurred by State and local educational agencies in educating children with disabilities and developing and implementing statewide systems of early intervention services, and through a variety of discretionary programs that provide funds to meet designated Federal priorities.

Grants to States

The Committee recommends an appropriation of $1,976,095,000 for grants to States, which is $121,885,000 more than the fiscal year 1991 appropriation and the same as the administration's request and the House allowance.

This program supports formula grants to States to finance a portion of the cost of providing special education and related services for children with disabilities. State grants are based on the number of children with disabilities served. The fiscal year 1992 appropriation will become available on July 1, 1992, for use during the 1992–93 school year.

The Committee's recommended funding level represents approximately 8.7 percent of the estimated average per pupil expenditure and would provide an estimated $439 per child for the 4,505,000 children expected to receive special education during the 1992-93 school year.

Chapter 1 handicapped grants

For the chapter 1 State agency program for children with handicaps, the Committee provides $148,861,000, the same as the fiscal year 1991 appropriation, $23,200,000 more than the administration's request, and $13,200,000 more than the House allowance. This program is expected to serve an estimated 272,000 children, with a national average Federal contribution of approximately $547 per child.

This appropriation begins the process of merging the chapter 1 handicapped program with programs for children with disabilities authorized under IDEA. The Committee understands that the authorizing committees are prepared to address this issue during the 102d Congress.

Preschool grants

The Committee recommends an appropriation of $320,000,000 for preschool grants in fiscal year 1992, an increase of $27,230,000 over the fiscal year 1991 appropriation and $24,080,000 more than the administration's request and the House allowance. The preschool grant program provides formula grants to States based on the number of preschool children with disabilities, aged 3 through 5 years, who are served.

The amount provided by the Committee is approximately $889 per child for the 360,000 preschoolers expected to be receiving special education and related services in the 1992-93 school year, an increase of $67 per child over the per child amount in the 1991-92 school year.

Grants for infants and families

The Committee recommends an appropriation of $175,000,000 for grants for infants and families in fiscal year 1992. This amount is $57,892,000 more than the fiscal year 1991 appropriation, $46,181,000 more than the administration's request, and the same as the House allowance.

Under proposed reauthorization, the early intervention program will continue to provide assistance to States in coordinating the efforts of education, health, and human services agencies in serving infants, and the families of infants born with disabilities or at risk for developmental delays, aged birth through 2 years. The preventive approach of the infants and families program is designed to optimize the potential of these children and help us to meet our Nation's No. 1 educational goal: By the year 2000, all children in America will begin school ready to learn.

Bill language has again been included to make funds for grants for infants and families available on July 1. This provision places the allocation of grants for infants and families on the same schedule as that for the other State grant programs funded under the Individuals with Disabilities Education Act.

The Committee has provided this significant increase in funding to help States facing a fiscal crisis to stay in the program and to provide rewards to those States making progress toward full implementation. States have continued to express concern as to whether the Federal commitment to this program will continue. The Committee reiterates its strong commitment to this program as the principal component of a strategy to ensure that infants and toddlers with disabilities have access to services that will assist them to maximize their potential for success in their schoolage years and beyond.

Deaf-blindness

The Committee has included $13,000,000 for deaf-blind projects, which is $151,000 above the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance.

Deaf-blindness funds are used to support 45 regional projects serving children and youth who are both deaf and blind, and for technical assistance grants and model demonstration projects. Public Law 101–476, Education of the Handicapped Act Amendments of 1990, expanded services to deaf-blind infants and toddlers.

Severe disabilities

The Committee has included $8,000,000 for the severely handicapped program, $131,000 more than the fiscal year 1991 appropriation and the administration's request and the same as the House allowance. This program awards grants and contracts for projects demonstrating the best methods of serving children with severe disabilities. The 1990 amendments emphasize educating children in integrated classes.

Serious emotional disturbance

The Committee has included $4,000,000 for the serious emotional disturbance program, $2,048,000 more than the fiscal year 1991 appropriation and the administration's request and the same as the House allowance.

This program supports projects to improve special education and related services for children and youth with serious emotional disturbance. These children remain significantly unserved or underserved by special education. Funds may also be used to develop and demonstrate innovative approaches to assist and to prevent children with emotional and behavioral problems from developing serious emotional disturbances that require special education.

Early childhood education

The Committee has included $25,000,000 for early childhood education, $798,000 more than the fiscal year 1991 appropriation and the administration's request and the same as the House allowance.

Early childhood education funds support demonstration projects, technical assistance, and research to aid States as they provide special education and early intervention services to infants, toddlers, and children with disabilities from birth through 8 years of age. Special emphasis is placed on helping States implement the grants for infants and families and the preschool grants programs. The 1990 amendments add authority for projects that will increase understanding of early intervention and preschool needs of children exposed prenatally to maternal substance abuse.

The amount provided will maintain support for all continuations, including five research institutes, at approximately $18,602,000, with the remaining $6,398,000 available for new projects.

Secondary and transitional services

The bill provides $19,000,000 for secondary and transitional service projects, an increase of $4,361,000 over the budget request and the fiscal year 1991 appropriation, and $2,000,000 over the House appropriation. Of the amount appropriated, $9,484,000 will be available to continue secondary education and transitional services for youth with disabilities, except those under subpart (e). The remaining $9,516,000 will be available to fund the one-time, 5-year competitive State grant program authorized under Public Law 101-476 for joint efforts (subpart (e)) between State vocational rehabilitation agencies and State education agencies to develop, implement, and improve systems to provide transition services for youth with disabilities from age 14 through the age they exit schools. In fiscal year 1991, the Department will fund 11 to 12 States. The Committee is concerned that 49 States have submitted joint applications for these funds, but most will not be funded. The additional funding in fiscal year 1992 should allow for an additional 9 or so States to receive funding.

Postsecondary education

The Committee has provided $9,000,000 for postsecondary education programs, $441,000 more than the fiscal year 1991 appropriation and the administration's request and the same as the House allowance.

This program supports efforts to improve postsecondary programs for persons with disabilities. Program funds currently support grants to postsecondary and vocational technical schools for serving deaf students; demonstrations to focus on vocational outcomes for students who have recently left secondary education; and demonstrations to develop short-term educational interventions necessary to assist youth to secure competitive employment. Of the amount provided, at least $4,000,000 will be available for continued support to four institutions serving the deaf, and the Department may give consideration to establishing an additional regional postsecondary program.

Innovation and development

The Committee recommends an appropriation of $21,000,000, $826,000 more than the fiscal year 1991 appropriation and the administration's request and $3,000,000 less than the House allowance. These funds support research and related activities to assist special education, related service, early intervention, and other appropriate personnel, including parents, in improving services to children with disabilities, and to conduct research, surveys, and demonstrations related to the provision of services to children with disabilities.

The Committee remains concerned that additional emphasis is needed on addressing the needs of students with attention deficit disorder [ADD], and directs the Department to continue to assist State and local education agencies that are responding to the demand for services for affected individuals. The Department is urged to explore additional means, both within and without special education programs, of improving services for children with attention deficit disorder. Consideration should be given to educator training and curricular development in university educator preparation programs.

Of the amount provided, the Committee directs that not less than $1,000,000 be made available for continuation and expansion of center activities designed to improve educational opportunities for children with ADD, including the development and dissemination of materials useful to parents and professionals that provide information on effective assessment and intervention practices in both regular and special education environments.

Media and captioning services

The Committee has included $17,000,000 for media and captioning services, $576,000 more than the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance. The primary focus of this program is the captioning of commercial films and the closed captioning of television. In addition, funds are awarded to the National Theater of the Deaf and Recording for the Blind, Inc.

Within the amount provided, the Committee recommends not less than $1,000,000 for descriptive video services for the visually impaired.

The Committee has included $500,000 to support activities to distribute closed caption decoders. Funds may be used to support the provision of free decoders, as well as promotional activities.

The Committee has included $2,000,000 within the amount recommended, for Recording for the Blind, Inc., an increase of $219,000 over the fiscal year 1991 appropriation. The funds provided will continue support for tape-recorded textbooks, including technical books in the sciences, mathematics, and engineering, for children and adults who are visually impaired.

Technology applications

The Committee has included $10,000,000 for special education technology. This amount is $4,407,000 more than the fiscal year 1991 appropriation and the administration's request and the same as the House allowance. This program supports research, dissemination, and technical assistance related to the development, production, and marketing of technology for use in the education of children with disabilities. Of the amount provided, roughly $7,400,000 will be available for new projects.

Special studies

The Committee has provided $4,000,000 for special studies activities, which $96,000 above the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance. Special studies funds support grants and contracts to assess progress in implementing Federal disability programs, as well as the effectiveness of State and local efforts to provide early intervention services and free and appropriate public education to children with disabilities. These activities provide Congress with information relevant to policymaking, and State, local, and Federal agencies with information relevant to program management, administration, delivery, and effectiveness.

Personnel development

The Committee recommends an appropriation of $89,800,000 for special education personnel development. This amount is $20,511,000 more than the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance. Personnel development funds are used to award grants to institutions of higher education, State educational agencies, and other nonprofit agencies to assist them in training personnel for careers in special education and early intervention services, and to develop new teaching approaches. Public Law 101-476 authorized personnel training grants to historically black colleges and universities and other minority colleges and universities to increase the number of minority special education personnel.

The Committee is including a substantial increase for personnel development in recognition of the serious problem of recruitment and retention of special education teachers throughout the country. The population needing early intervention special education and related services continues to grow as a result of more children being identified as having disabilities, the expansion of services nationwide to children ages 3 through 5, and the new grants for the infants and families program. Also, the mandate for States to ensure that services are provided by qualified personnel requires that additional funds be available to higher education programs which train undergraduate and graduate students in the provision of services to children and youth with specific disabilities. The administration noted in its budget request that as much as 30 percent of the teaching force is working with less than full, appropriate credentials. In addition, educators and administrators presently know little about effectively meeting the needs of children with attention deficit disorder. The Committee intends that of the amount provided, $1,500,000 be used to develop new inservice and preservice training for special education and regular teachers in order to address the needs of children with ADD.

The Committee has again included $1,000,000 for the training of new interpreters for the deaf and hearing impaired. As stated last year, it is the preference of the Committee to include these funds under the appropriation for rehabilitation training. However, the Rehabilitation Act limits to 12 the number of interpreter training grants that may be funded, and 12 5-year interpreter training projects were begun in fiscal year 1990 under that authority. Reauthorization of that act has been delayed 1 year. With recent passage of the Americans With Disabilities Act, there is a critical need to train new interpreters, and the Committee has once more included funding under the part D authority for this purpose.

Parent training

The Committee has included $12,000,000 for the parent training program, which is $2,241,000 more than the fiscal year 1991 appropriation and the administration's request and $1,800,000 more than the House allowance.

Parent training grants are made to projects to train parents of children with disabilities to participate more effectively in meeting the educational needs of such children. The increase provided by the Committee is in recognition of the need for parent training programs in each of the 50 States, and for increasing the amount of the grant award to existing programs in order to assist them carry out their expanded authority to meet the needs of families with infants and toddlers with disabilities.

Clearinghouses

The Committee has provided $2,000,000 for recruitment and information clearinghouses, $475,000 more than the appropriation for fiscal year 1991 and the administration's request, and the same as the House allowance.

This amount will support activities of three clearinghouses, including the dissemination of information on special education and rehabilitation, postsecondary programs and services, and personnel recruitment and training. Additional funding is provided to expand outreach to traditionally underserved populations, including minorities and individuals in rural and urban areas.

Regional resource centers

The Committee has provided $7,000,000 for regional resource centers, which is $380,000 more than the appropriation for fiscal year 1991 and the administration's request, and the same as the House allowance.

This program supports six regional centers and one national coordinating center that provide technical assistance and training to States to improve their capacity to serve children with disabilities. The amount provided will provide continuation funding for the six regional centers and the national coordinating center.

REHABILITATION SERVICES AND DISABILITY RESEARCH

Appropriations, 1991	$1,889,288,000
Budget estimate, 1992	2,003,380,000
House allowance	1,998,501,000
Committee recommendation	2,071,158,000

The Committee recommends an appropriation of $2,071,158,000 for rehabilitation services and disability research. This is $67,778,000 more than the administration's budget request and $181,870,000 more than the fiscal year 1991 appropriation. The Committee recommendation is $72,657,000 more than the House allowance.

Programs authorized under the Rehabilitation Act of 1973 support a variety of activities that help persons with disabilities maximize their potential for employment and independent living.

Basic State grants

The Committee has included $1,788,000,000 for vocational rehabilitation grants to States, which is $155,375,000 more than the fiscal year 1991 appropriation and $52,520,000 more than the House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation and, therefore, made no specific recommendation concerning this individual program.

Basic State grant funds assist States in providing a range of services to help persons with physical and mental disabilities prepare for and engage in meaningful employment. States must provide a percentage match of these Federal funds. For fiscal year 1992, the State share must be at least 20 percent of the 1988 base and 24 percent for any increase above that base. Authorizing legislation requires States to give priority to persons with severe disabilities.

Consistent with the authorizing statute, a minimum of one-fourth of 1 percent of the appropriation for basic State grants, or $4,470,000, is set aside for grants to Indians.

Supported employment State grants

The Committee has included $31,065,000 for the Supported Employment State Grant Program. This amount is $1,915,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation.

The Supported Employment State Grant Program assists persons who may have been considered too severely disabled to benefit from vocational rehabilitation services to obtain competitive employment. Short-term vocational rehabilitation services are augmented with ongoing support provided by State and local organizations, and funds are distributed by formula.

Client assistance

The Committee has included $9,141,000 for the Client Assistance Program, which is $831,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation.

The Client Assistance Program funds State formula grants to assist vocational rehabilitation clients or client applicants in understanding benefits available to them and in dealing with service providers. Funds are distributed to States according to a population-based formula, except each State is guaranteed a minimum grant of $75,000. States must operate client assistance programs in order to receive vocational rehabilitation State grant funds.

The Committee recognizes that States receiving minimum allotments have not received increases, as allowed under the Rehabilitation Act Amendments of 1986, in several years. The Committee intends that the Rehabilitation Services Administration Commissioner increase the minimum allotment to States, provided that the sums appropriated for fiscal year 1992 exceed the sums appropriated in fiscal year 1991 by more than the percentage increase in the Consumer Price Index.

Special demonstration programs

The Committee has included $25,103,000 for special demonstration programs for persons with severe disabilities, which is $6,735,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation.

This program awards grants to States and public and other nonprofit agencies and organizations to develop innovative methods and comprehensive services to help severely disabled individuals achieve satisfactory vocational outcomes or attain greater independent functioning. Special demonstration programs also support 13 regional multidisciplinary systems to serve persons with spinal cord injuries.

Of the amount provided, $1,000,000 is to be available for demonstration grants for the purpose of providing rehabilitation and education services to low-functioning deaf adults.

The Committee has included $6,000,000 for a continuation grant to a hearing research center to support basic and applied research activities. These funds would cover the costs associated with research on the hearing impaired including age-related hearing loss, tinnitus, ototoxic action of therapeutic drugs, noise-induced hearing loss, and implantable hearing aids.

The Committee again urges RSA to place a high priority on demonstration projects serving persons with head injuries. These individuals continue to be underserved by the rehabilitation system.

Supported employment projects

The Committee has provided $10,423,000 for supported employment projects, $400,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation.

Projects are authorized at the National, State, and local levels for paid work in a variety of settings, particularly at regular worksites, especially designed for severely disabled persons for whom competitive employment at or above the minimum wage is considered unlikely. Discretionary awards are made on a competitive basis to public and nonprofit rehabilitation facilities, designated State units, and public or private organizations. In 1991, this program is supporting 31 projects, including 17 statewide demonstrations, 12 community-based service projects, and 2 national technical assistance projects.

Recreational programs

The Committee has included $2,617,000 for recreational programs, the same as the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation.

Recreational programs help finance activities such as sports, music, dancing, handicrafts, and art to aid in the mobility and socialization of individuals with disabilities. Grants are awarded to States, public agencies, and nonprofit private organizations, including institutions of higher education.

Migratory workers

The Committee recommends $1,060,000 for migratory workers, which is the same as the fiscal year 1991 appropriation and the

House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation. Migratory worker projects provide a 90-percent Federal match for comprehensive rehabilitation services to disabled migrant and seasonal farmworkers and their families. Some projects also develop innovative methods for reaching and serving this population. Emphasis is given to outreach, specialized bilingual rehabilitation counseling, and coordination of vocational rehabilitation services with services from other sources.

Projects with industry

The Committee recommends an appropriation of $20,390,000 for projects with industry. This is $945,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation.

The Projects With Industry Program is the primary Federal vehicle for promoting greater participation of business and industry in the rehabilitation process. Projects with industry provide disabled persons with training and experience in realistic work settings to prepare them for employment in the competitive market. Postemployment support services are also provided. Grants are made to a variety of agencies and organizations, including corporations, rehabilitation facilities, labor and trade associations, and foundations.

The Committee urges the Department to provide cost-of-living increases within the amount provided to projects which are continuations in fiscal year 1992.

Helen Keller National Center

The Committee includes $5,867,000 for the Helen Keller National Center for Deaf-Blind Youth and Adults. This amount is $500,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for the unauthorized activities in the "Rehabilitation services and disability research" account, pending enactment of reauthorization legislation.

The Helen Keller National Center consists of a national headquarter in Sands Point, NY, with a residential training and rehabilitation facility where deaf-blind persons receive intensive specialized services; a network of 10 regional field offices which provide referral and counseling assistance to deaf-blind persons; and an affiliated agency network system of 28 agencies. In 1991, the Center will provide direct services to 85 individuals at headquarters, and counseling and referral services to 1,550 persons through its regional representatives. Agencies affiliated with the center will serve an additional 1,975.

Independent living

The Committee recommends an appropriation of $50,779,000 for independent living programs. This is $2,691,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for the Rehabilitation Act programs, pending enactment of reauthorization legislation. Of the amount provided, $14,200,000 is for part A State grants for comprehensive independent living services, $29,000,000 is for part B independent living centers, $6,505,000 is for part C services for older blind individuals, and $1,074,000 is for part D protection and advocacy services for persons with severe disabilities.

The Committee recommendation of $14,200,000 for part A State grants for independent living services is $581,000 more than the fiscal year 1991 appropriation and the House allowance. The part A State formula grant program finances services for individuals who are so severely disabled that they do not presently have the potential for employment, but may benefit from vocational rehabilitation services which will enable them to live and function independently. These services may include counseling, housing, transportation, attendant care, recreational therapy, health maintenance, and preventive services.

For Part B independent living centers, the Committee has included $29,000,000, which is $1,421,000 more than the fiscal year 1991 appropriation and the House allowance. Funding for these centers supports a network of nonresidential, community-based centers which provide a wide range of services designed to help severely disabled persons live more independently in family and community settings. Discretionary grants are awarded on a competitive basis to State vocational rehabilitation agencies or to public or private nonprofit organizations.

The Committee recommendation of $6,505,000 for part C services to older blind individuals is $591,000 more than the fiscal year 1991 appropriation and the House allowance. The part C program provides discretionary grants on a competitive basis to State vocational rehabilitation agencies to assist persons aged 55 or older to adjust to their blindness by increasing their ability to care for their individual needs. Services may include the provision of eyeglasses or other visual aids, mobility training, braille instruction, guide services, reader services, and transportation.

The Committee is providing $1,074,000 for part D protection and advocacy services for persons with severe disabilities, which is $98,000 more than the fiscal year 1991 appropriation and the House allowance. The Committee intends that these funds be used to support programs of protection and advocacy for persons with severe disabilities who are not eligible for existing protection and advocacy programs or client assistance program services. The Committee again encourages that these funds be used to support projects in as many jurisdictions as practicable, to ensure full access to services and rights, including those rights established in the Fair Housing Act Amendments and the Americans With Disabilities Act, for persons with severe disabilities.

Training

The Committee recommends an appropriation of $36,688,000 for training, which is $3,335,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for Rehabilitation Act programs, pending enactment of reauthorization legislation.

This program is designed to ensure that skilled personnel are available to serve the rehabilitation needs of disabled persons. This program supports training, traineeships, and related activities designed to increase the numbers of qualified personnel providing rehabilitation services. Grants and contracts are awarded to States and public or nonprofit agencies and organizations, including institutions of higher education. Preservice, inservice, short term, and continuing education programs are funded, as well as programs to train interpreters for the deaf and hearing-impaired.

National Institute on Disability and Rehabilitation Research

The Committee recommends an appropriation of $61,000,000 for the National Institute on Disability and Rehabilitation Research [NIDRR]. This amount is $2,076,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for Rehabilitation Act programs, pending enactment of reauthorization legislation.

The NIDRR provides for a comprehensive and coordinated approach to the administration and conduct of research, demonstration projects, and related activities concerning the rehabilitation of disabled persons, including the training of persons who provide rehabilitation services or who conduct rehabilitation research. The NIDRR awards competitive grants to support research in federally designated priority areas, including research and training centers, rehabilitation engineering centers, research and demonstration projects, and dissemination projects. The NIDRR also supports field-initiated research projects, research training, and career development fellowships.

Nearly 2 million Americans sustain traumatic brain injury [TBI] each year, and many of these persons are left with serious and lifelong disabilities. The Committee recognizes the need for increased support of education and dissemination of information for persons with TBI, their families, and professionals involved in providing services related to TBI, and urges the NIDRR to address this need in its programmatic priorities.

Of the total amount provided, the Committee expects that $5,000,000 will be used for technical assistance related to implementation of the Americans With Disabilities Act. The Committee supports the development and expansion of community-based partnerships. Such community programs should promote voluntary compliance with the ADA and provide specific services targeted at persons with disabilities, local businesses operating public accommodations, local governments addressing transportation and other public services, and employers from all sectors.

The Committee supports the efforts of the State of Hawaii to establish a demonstration project which will provide training and technical assistance to the blind vendors operating at the Honolulu International Airport. Funds under this project are also expected to be utilized to strengthen the State's Randolph-Sheppard Blind Vendor Program.

Technology assistance

The Committee recommends an appropriation of $28,000,000 for technology assistance. This is $7,018,000 more than the fiscal year 1991 appropriation and $660,000 more than the administration's request and the House allowance.

The Technology Assistance Program is designed to improve occupational and educational opportunities and the quality of life for people with disabilities of all ages. It provides discretionary grants to States to develop statewide programs that increase access to, and the availability of, assistive technology devices and services. The program also provides technical assistance and other discretionary grants intended to improve the delivery of technology-related assistance, and to eliminate barriers that impede access to assistive technology devices and services. The National Institute on Disability and Rehabilitation Research administers the program. First initiated in 1989, with projects in nine States, this program now supports 31 State grants.

This amount will support continuation of currently funded State grants and at least 11 new State grants under title I. The amount also includes $500,000 for technical assistance and funding for new and continuing title II innovation and demonstration projects and training and public awareness projects, as requested by the Department. For project funds dedicated to training and public awareness projects authorized under title II, part C, the Committee recommends that priority be given to technology training (sec. 221a).

Evaluation

The Committee recommends an appropriation of $1,025,000 for evaluations. This is $49,000 more than the fiscal year 1991 appropriation and the House allowance. The administration submitted a consolidated budget request for Rehabilitation Act programs, pending enactment of reauthorization legislation. Funds are provided under this activity for studies to evaluate the impact and effectiveness of programs authorized by the Rehabilitation Act of 1973.

Special Institutions for Persons With Disabilities

AMERICAN PRINTING HOUSE FOR THE BLIND

Appropriations, 1991	$6,136,000
Budget estimate, 1992	6,136,000
House allowance	5,500,000
Committee recommendation	6,600,000

The Committee recommends an appropriation of $6,600,000 for the American Printing House for the Blind [APH]. This is $464,000 more than the fiscal year 1991 appropriation and the administration's request, and $1,100,000 more than the House allowance.

This appropriation helps support the American Printing House for the Blind, which provides educational materials to legally blind students below the college level. The Federal subsidy provides about 35 percent of the APH's total sales income. Materials are distributed free of charge to schools and States through per capita allotments based on the total number of blind students. Materials provided include textbooks and other educational aids in braille, large type, and recorded form and microcomputer applications.

The Committee concurs with concern expressed by the House Committee that the APH has failed to increase the number of its disabled employees. Although 32 vacancies were filled in 1990, none were filled by disabled persons. The Committee expects a full report on this matter when the APH appears to present the fiscal year 1993 budget request.

NATIONAL TECHNICAL INSTITUTE FOR THE DEAF

Appropriations, 1991	$37,212,000
Budget estimate, 1992	37,226,000
House allowance	38,500,000
Committee recommendation	39,439,000

The Committee recommends an appropriation of $39,439,000 for the National Technical Institute for the Deaf [NTID]. This is $2,227,000 more than the fiscal year 1991 appropriation, $2,213,000 more than the administration's request, and $939,000 more than the House allowance.

The Institute, located on the campus of the Rochester Institute of Technology, was created by Congress in 1965 to provide a residential facility for postsecondary technical training and education for deaf students. NTID also provides support services for deaf students, trains professionals in the field of deafness, and conducts applied research. Of the $39,439,000 provided by the Committee, $39,097,000 is designated for operations, an increase of $2,213,000 over 1991 and the administration's budget request, and $597,000 more than the House allowance.

The Committee has provided $342,000 for the endowment matching fund. The Committee continues to believe that the endowment matching fund is an important mechanism for generating private contributions for NTID, lessening its dependence on Federal funding, and strengthening its long-term financial security. The amount provided is the same as the budget request and an increase of $14,000 above the 1991 level. It is $342,000 more than the House allowance.

The Committee concurs with the direction of the House that the General Accounting Office [GAO] conduct a review of NTID's long-term financial situation, and further specifically requests that GAO review the Institute's construction needs, and resources on hand to meet those needs.

GALLAUDET UNIVERSITY

Appropriations, 1991	$72,262,000
Budget estimate, 1992	70,846,000
House allowance	73,172,000
Committee recommendation	76,540,000

The Committee recommends an appropriation of $76,540,000 for Gallaudet University. This is $4,278,000 more than the fiscal year 1991 appropriation, $5,694,000 more than the administration's request, and $3,368,000 more than the House allowance.

Gallaudet University is a private, nonprofit institution offering college preparatory, undergraduate, and continuing education programs for deaf students, as well as graduate programs in fields related to deafness for hearing-impaired and hearing students. The university conducts basic and applied research related to hearing impairments and provides public service programs for the deaf. Of the amount provided, $50,480,000 is for Gallaudet University program operations. This amount is $2,857,000 more than the fiscal year 1991 appropriation, the administration's request, and the House allowance. The increase provided is sufficient to allow Gallaudet to purchase computer equipment if it chooses to do so. The House provided $850,000 in a separate appropriation for the purchase of computers.

Funds for Gallaudet also support the Model Secondary School for the Deaf and the Kendall Demonstration Elementary School. The Model Secondary School for the Deaf serves as a laboratory for educational experimentation and development, disseminates models of instruction for the deaf, and prepares deaf adolescents for postsecondary academic or vocational education. The Kendall Demonstration Elementary School develops and provides instruction for children from infancy through age 15. Of the amount provided for Gallaudet, the Committee is recommending a consolidated appropriation for these two precollege programs of $22,560,000. This is $1,337,000 more than the fiscal year 1991 appropriation, the administration's request, and the House allowance.

The Committee has also provided $1,000,000 for the Gallaudet University endowment matching fund, $24,000 more than the amount provided for fiscal year 1991 and the House allowance, and the same amount as the administration requested. The Committee believes that the endowment is an important means of generating more private assistance for Gallaudet and lessening its dependence on Federal funding.

Finally, the Committee has included $2,500,000 for construction at Gallaudet University, $1,500,000 more than the budget request and approximately the same as the fiscal year 1991 appropriation. The amount provided will be the second installment of a 3-year $15,000,000 project to expand and renovate the Hall Memorial Building, which is the university's major classroom facility, and for new construction to house the Gallaudet Research Institute. This project will be jointly funded by the University and the Federal Government, with each contributing 50 percent of the cost of construction and renovation.

VOCATIONAL AND ADULT EDUCATION

Appropriations, 1991	$1,245,536,000
Budget estimate, 1992	1,254,519,000
House allowance	1,651,500,000
Committee recommendation	1,323,333,000

The Committee recommends an appropriation of $1,323,333,000 for vocational and adult education. This amount is $68,814,000 more than the administration's request, $77,797,000 more than the fiscal year 1991 comparable amount, and $328,167,000 below the House amount.

Basic grants.—The Committee has included $897,500,000 for basic grants, $40,997,000 more than the fiscal year 1991 comparable appropriation and $6,844,000 more than the administration's request. The House recommended $1,077,000,000 for the Basic Grant Program.

Funds provided under the Basic Grant Program assist States and localities in expanding and improving their programs of vocational education. The Perkins Act provides that: (1) 25 percent of basic

State grant funds be reserved as follows: State administration, 5 percent; sex equity programs, 3 percent; programs for displaced homemakers and single parents, 7.5 percent; State leadership activities, 8.5 percent; and corrections education programs, 1 percent; (2) of the remaining funds, those distributed to local school districts will be allocated based on their share of the chapter 1 basic grant allocation to their State, enrollment of individuals with disabilities, and enrollment in vocational education programs, while funds distributed to postsecondary institutions will be allocated based on the number of Pell grant and BIA recipients, enrollments of students served by vocational rehabilitation programs, and the institution's relative share of all vocational students; and (3) requires States to develop and implement a system of standards and measures of performance for secondary and postsecondary vocational education programs and to assess program quality based on these standards. States would also be required to take action to improve local programs that continue to be ineffective after 2 years.

The Committee points out that the absence of an explicity authorization in Public Law 101-392 for stipends for Indian students was not intended to prohibit such stipends, and the Department is directed to continue the program of stipends for Indian students.

Community education employment centers [CEEC].—The Committee has provided $7,500,000 for the model Community Education Employment Centers Technology Education Act Amendments of 1990. The Committee believes there is a need to test and evaluate these model educational centers designed to assist low-income students in rural and urban areas in overcoming barriers to education and securing employment. The Committee believes the model centers may demonstrate ways we could better invest education dollars.

The Committee directs the Department of Education to fund no more than five model centers nationwide and expects the Department to divide the $7,500,000 proportionately. The Committee notes that economically and educationally disadvantaged students in low-income urban school districts in New Jersey would greatly benefit from the extensive services offered in these model centers. The Committee encourages the Department to test the success of the CEEC model in an urban school district in New Jersey, where students face the various barriers to education and employment that the program is designed to address.

Supplemental grants.—Due to funding constraints, the Committee was not able to provide an appropriation for the newly authorized title III, part F, Supplemental Grant Program. The Committee believes this is an important program, and will look favorably on this program in the future. These grants provide funds to school districts in economically depressed areas to improve vocational education facilities, to purchase or lease vocational education equipment, and to carry out other program improvement activities.

Community-based organizations.—The Committee recommends $12,000,000 in funding for this program, $289,000 more than the 1991 appropriation level and the administration's request and the same as the House allowance. States use these funds to support eligible recipients and community-based organizations to operate joint vocational education programs for students who might not otherwise be served through school-based vocational education. The types of services provided would include prevocational education, basic skills training, internships, and guidance and counseling.

Consumer and homemaking education.—The Committee has provided $33,352,000 for consumer and homemaking education, the same level of funding provided in fiscal year 1991 and $4,648,000 less than the House allowance. The administration did not request funding for this program. Expenditure reports indicate that each Federal dollar for consumer and homemaking education is matched by over $20 from State and local sources.

State councils.—The Committee recommends $9,000,000 for State councils on vocational education; the same as the House level of funding, $217,000 more than the fiscal year 1991 level and the administration's request. As a requirement for receiving Federal vocational education funds, each State must establish a State council that reviews and comments on its State vocational education plan, analyzes and reports on the allocation of funds and the availability of vocational education programs in the State, and evaluates State vocational education programs every 2 years.

Tech-prep programs.—The Committee recommends $65,971,000 to continue the tech-prep program, authorized for the first time in fiscal year 1991. This is $34,029,000 less than the House allowance and $2,537,000 more than the 1991 appropriation level and the administration request.

This program is designed to provide a structured link between secondary schools and postsecondary educational institutions. The program supports planning and demonstration grants to consortia of local educational agencies and postsecondary institutions to develop and operate model 4-year programs that begin in high school and provide students with the mathematical, science, communication, and technological skills needed to earn a 2-year associate degree or 2-year certificate in a given occupational field. The statute provides that tech-prep funds be distributed to the States through a formula when the appropriation exceeds $50,000,000.

Tribally controlled postsecondary vocational institutions.—The Committee has provided $2,500,000 for tribally controlled postsecondary vocational institutions. This is the same level of funding provided by the House, and $60,000 more than the 1991 appropriation, and the administration's request. This program provides grants for the operation and improvement of tribally controlled postsecondary vocational institutions to ensure continued and expanded educational opportunities for Indian students. Grantee institutions may use the funds for a broad range of services, including: costs connected with training teachers, providing instructional services, purchasing equipment, administration, and operating and maintaining the institution.

National programs, research.—The Committee has provided $10,000,000 for research. This will support discretionary research activities, the National Center for Research in Vocational Education, and the six curriculum coordination centers. This amount includes $3,000,000 for the national assessment of vocational education.

National programs, demonstrations.—For demonstrations, the Committee recommends $14,000,000, $2,000,000 more than the

House level, $5,000,000 more than the administration request, and $1,030,000 more than the fiscal year 1991 amount. The reauthorized Perkins Act requires that priority be given to demonstration grants that: (1) provide for the development of telecommunication materials for use in vocational education instruction; and (2) establish demonstration centers for retraining of dislocated workers. Demonstration grants may also support projects to: provide training in skilled trades identified as having shortages of workers, integrate vocational and academic instruction, address dropout prevention by establishing partnerships between local educational agencies or area vocational schools and postsecondary institutions, and provide basic and vocational education programs to criminal offenders.

The Committee is concerned that not enough is being done to integrate vocational education, higher education, and industry to address the needs of changing technologies and a better prepared work force. Therefore, the Committee has added $3,000,000 to further this effort and directs the Secretary of Education to fund a model national demonstration project that includes a major university research institute and a training center in a community college that integrates technical research and vocational education in manufacturing technologies.

The Committee continues to be concerned over the illiteracy problem in juvenile and adult correctional facilities. Prison education should be a high priority in the rehabilitation of the incarcerated. Recent studies have shown that education prepares the inmate psychologically for return to society and also produces a lower rate of recidivism among those who had participated in education programs while incarcerated. Therefore, the Committee has included $2,000,000 for the continuation of model demonstration programs in the areas of corrections education. These model programs will continue to test a range of options including inmate tutors working in school/library settings under the supervision of trained teachers; the use of community volunteers who are supervised in the correctional setting; programs which network with local colleges and universities; the use of innovative software and interactive video and distance learning programs; and training programs for non-English speaking persons. Preference in selecting models should be given to programs that are ongoing and will be continued after Federal support ends.

In fulfilling the underlying mission of vocational and adult education programs, the Committee urges the Department and the States to devote special attention to the needs of dislocated workers. Changes in Federal environmental and defense policy, for example, are expected to result in thousands of dislocated workers in the Northwest and Appalachian regions of this country. The Committee expects that aggressive steps will be taken to address this issue, including the development of specialized training programs, support for innovative demonstration projects, collaborative efforts with the Department of Labor, and technical assistance.

The Committee has also provided $2,000,000 to carry out a two-site demonstration of the community education and employment centers authorized by section 363 of Public Law 101-392. The Committee directs that each of these two demonstration sites be multicounty rural areas where at least one of the area educational agencies is eligible for assistance under section 1006 of the Elementary and Secondary Education Act of 1965, and where at least one county has been designated a labor surplus area. The Committee notes that the innovative technical training programs of the Oxford Hills Technical School in Norway, ME, and the Indian Hills Community College in Ottumwa, IA, would provide an excellent foundation for community education and employment centers and that these two schools meet both the eligibility requirements of the authorizing statute and the funding priorities stated above.

National programs, data systems.—For data systems the Committee recommends $5,000,000. This is the same as the House allowance and a $120,000 increase over the fiscal year 1991 amount and the administration request. This recommendation would continue funding for the National Occupational Information Coordinating Committee [NOICC]. NOICC and its affiliated State occupational information coordinating committees assist students, educators, and occupational planners in assessing current and future labor market conditions by assembling and disseminating occupational information.

Bilingual vocational training.—The Committee recommends $3,000,000 for this program, $112,000 over the 1991 appropriation and the same as the House allowance. The administration requested $2,888,000. This program provides funds on a competitive basis to State and local public agencies, higher education institutions, and private organizations to train limited English proficient students, provide instructor training, and develop instructional materials. The administration proposed to use all of the funds provided for this program in fiscal year 1992 to support projects that train limited English proficient individuals rather than for instructor training or materials development.

ADULT EDUCATION

The Committee has included $260,510,000 for adult education, $21,682,000 more than the fiscal year 1991 comparable appropriation, $9,783,000 more than the administration's request, and $19,490,000 less than the House allowance.

Adult education State programs.—For adult education State programs, the Committee provides $221,500,000, $20,465,000 more than the fiscal year 1991 appropriation and the same level as requested by the administration. The House provided $250,000,000.

Funds are allocated to the States and outlying areas through formula grants to support programs that assist educationally disadvantaged adults in developing basic skills, including literacy, and in achieving certification of high school equivalency. The grant formula is based, in part, on the number of persons age 16 and over in a State who do not have high school diplomas and who are not required to be enrolled in school. For fiscal year 1992, Federal funds may support up to 75 percent of each State's program. Each State must use (1) at least 10 percent of its grant to serve the incarcerated and institutionalized, (2) at least 10 percent for experimental demonstrations and teacher training projects, and (3) must give special attention to the needs of persons of limited English- speaking ability. No more than 20 percent of each State's grant may be used for high school equivalency programs, and no more than 5 percent may be used for administration.

National programs.—The Committee provides $9,000,000 for adult education national programs authorized under sections 383 and 384, the same level requested by the administration, recommended by the House, and $1,193,000 more than provided in fiscal year 1991.

These funds will support a broad spectrum of State program assistance and policy studies, including national program effectiveness studies; evaluations of the workplace literacy demonstration program and the corrections eduction set-aside; and a national conference on volunteer training and management.

Adult education national program funds also will be used to support the National Institute for Literacy Research and Practice which provides leadership and coordination for the national literacy effort by conducting research and development, providing technical assistance, identifying and validating effective practices, and disseminating information on best practices in adult education. Also included in national programs is $5,000,000 to support currently authorized adult literacy initiatives, including a National Conference on Education for Adult Learners.

Taking its lead from legislation introduced in the 101st Congress, the Department of Education, in fiscal year 1991, used its broad authority under section 384(a) of the Adult Education Act to begin planning for a literacy institute. It is expected that the National Literacy Act (H.R. 751) will be enacted in 1991, amending provisions of section 384(a) to establish the National Institute for Literacy. The Committee intends that upon enactment of H.R. 751, that the institute which the Department is establishing, will conform to the new satutory requirements.

The National Institute for Literacy is intended to be the lead coordinating agency for Federal literacy programs. In conducting or funding research on literacy, the Committee intends for the institute to work closely with the National Center on Adult Literacy, funded by the Department's Office of Educational Research and Improvement [OERI]. The center's mandate from OERI is to provide national leadership in research and development in adult literacy. Funds provided for the institute should not duplicate the work of the center or any other Federal agency or federally funded project.

The Committee is aware that an increasing number of young people who have completed high school and postsecondary education have difficulty accessing the employment sector. The Committee has provided $1,000,000 for joint school-to-work transition initiatives with the Department of Labor targeting this population.

The cost of illiteracy in the United States exceeds $250,000,000,000 annually, and over 50 percent of illiterates are thought to be learning disabled. There are programs which are helping the learning disabled overcome, cope with, and circumvent their unique learning disabilities, but these programs serve only a fraction of those who could benefit. The Committee has provided $1,000,000 for the establishment of a national center for the study of learning disabilties which would develop an objective, computerized battery of tests for the diagnosis of learning disabilities in adults; create a set of skills enhancement activities to address learning disabilities; and provide training for professionals to work with the learning disabled. The University of the Ozarks, which has an outstanding educational program for learning disabled college students, would be a likely site for such a center.

Literacy training for homeless adults.—The Committee provides $9,759,000 to carry out the adult literacy provisions of the Stewart B. McKinney Homeless Assistance Act, the same level of funding provided in fiscal year 1991. The House provided no funding for this program.

Funds for the literacy training for homeless adults program are used for discretionary grants to State education agencies to carry out, either directly or through grants or contracts with local recipients, programs of literacy training and basic skills remediation for homeless adults. Programs are required to develop cooperative relationships with other service agencies to provide an integrated package of support services addressing the most pressing needs of homeless adults. In making awards to State education agencies, consideration will be given to the States' estimates of the number of homeless adults expected to be served and the number of such adults in each school district.

The Committee urges the Department to fund initiatives that support the development, implementation, and evaluation of models to successfully improve adult literacy among diverse populations in both rural and urban areas, and to foster the continuing education of adults in a variety of settings including schools, industry, and community-based settings.

Workplace literacy partnerships.—The Committee provides $19,251,000 for workplace literacy partnership grants, the same level of funding provided in fiscal year 1991 and requested by the administration. The House has recommended $20,000,000.

This program provides funds for competitive demonstration grants for exemplary education partnerships that provide literacy training to meet workplace needs. These demonstration projects are designed and operated by partnerships between business, industry, labor organizations, or private industry councils and State education agencies, local education agencies, institutions of higher education, or schools. Programs are designed to improve the productivity of the work force through improvement of workers' literacy skills. Services may include: adult secondary education; adult literacy and basic skills training; literacy training for limited English proficient adults; updating basic skills to reflect the changing needs of the workplace; improving the competency of adult workers in speaking, listening, reading, and problem solving; educational counseling; transportation; and child-care services. Federal funds may support up to 70 percent of the cost of each program.

English literacy grants.—The Committee provides $1,000,000 for English literacy grants, $24,000 more than requested by the administration and the fiscal year 1991 funding level, and the same level of funding as provided by the House. These grants support activities authorized under section 372(d) of the Adult Eduction Act. Funds would be provided for national discretionary projects to support: (1) projects that demonstrate innovative approaches and methods of teaching basic literacy skills to limited English proficient adults; and (2) a national clearinghouse on literacy education for the limited English proficient.

Commercial driver literacy.—The Committee has included $3,000,000 for continuing adult literacy education programs for commercial drivers authorized for the first time in fiscal year 1991 under section 373 of the Adult Education Act (as amended by Public Law 102-26). This amount is $3,000,000 more than the House allowance and $1,048,000 more than the 1991 appropriation. The administration did not request funding for this program. This program funds projects designed to increase the literacy skills of commercial drivers, which are necessary to complete the knowledge test requirements under the Commercial Motor Vehicle Safety Act of 1986.

STUDENT FINANCIAL ASSISTANCE

Appropriations, 1991	$6,713,681,000
Budget estimate, 1992	6,713,681,000
House allowance	6,853,000,000
Committee recommendation	6,900,356,000

The Committee recommends an appropriation of $6,900,356,000 for student financial assistance, which is $186,675,000 more than the amount provided in fiscal year 1991 and the administration's budget request, and $47,356,000 more than the House allowance. Programs in this account are authorized by parts A, C, D, and E of title IV of the Higher Education Act of 1965 [HEA], which expires September 30, 1991, but is extended for 1 year by the General Education Provisions Act. New authorizing legislation has been proposed by the President and the budget estimate for this account is based on these proposals. However, since new legislation will not be enacted for fiscal year 1992 appropriations, committee recommendations are based on current law.

The Committee has included language that restricts the ability of the Department of Education to expend funds to initiate or continue proceedings that might classify telecommunications-delivered college and university courses as correspondence study. The Committee understands that over the last decade, a significant number of community colleges and major universities have employed telecommunications delivery to extend their campuses to students who might not otherwise be able to receive higher education. The Committee also understands that the Committee on Labor and Human Resources is considering the adoption of language in the reauthorization of the Higher Education Act of 1965 that would classify such courses as regular instruction for title IV purposes.

Pell grants

The Committee recommends $5,460,000,000 for the Pell grant program. This is $10,000,000 more than the House allowance and $14,282,000 less than the fiscal year 1991 appropriation, which included $362,059,000 in prior-year shortfalls and $110,277,000 in a contingency reserve fund. The administration's request for Pell grant funds is based on its proposed reform of the program. The Committee has based its recommendation on current law.

The Committee believes that the recommended amount is adequate to cover program costs. The bill includes a contingency appropriation of $100,000,000 to address somewhat higher cost estimates by the Department of Education. These funds are provided to avoid any disruption in benefits to students in the event of a shortfall, though the Committee does not believe it will be necessary to tap these moneys. The Committee bill funds a maximum Pell Grant award level of $2,400, the same as the 1991 maximum. The Committee's recommendation continues the limitations on Pell awards contained in the 1991 appropriation but does not add any new restrictions.

Pell grants provide financial assistance to help more than 3 million financially needy undergraduate students pay their educational costs. Grants may not exceed 60 percent of the cost of attendance and provide the base upon which other financial assistance is built.

Presidential achievement scholarships—proposed legislation

Because there is no authorization for this program, the Committee is not providing funding for the administration's proposed Presidential achievement scholarships. The administration requested $170,000,000 for the scholarship program. The House also provided no funding.

Supplemental educational opportunity grants

The Committee recommends $570,000,000 for supplemental educational opportunity grants, which is $49,845,000 more than the fiscal year 1991 appropriation, $223,055,000 more than the administration request, and the same as the House allowance.

Funds are made available to postsecondary institutions to provide institutionally administered, need-based aid to undergraduate students. In 1991, approximately 835,000 will receive SEOG awards. These supplementary grants are administered by institutional aid officers, who have flexibility in determining student awards. The maximum grant level will remain at $4,000 in 1992. Participating institutions must provide a specified match of program funding in order to receive SEOG funds. This required match will be 15 percent in fiscal year 1992, as it is in 1991.

College work-study

The Committee recommends $618,476,000 for college work-study, $23,787,000 more than the fiscal year 1991 appropriation, $221,861,000 more than the fiscal year 1992 administration request, and $23,476,000 more than the House allowance.

The College Work-Study Program assists approximately 827,000 students, through part-time employment, to meet the costs of postsecondary education. Grants are awarded to approximately 4,000 qualifying institutions, which select needy undergraduate and graduate students for participation. The statutory institutional matching share of a student's part-time earnings will continue to be 30 percent (or 50 percent in the case of private, for-profit organizations). A student's work-study earnings may not exceed the amount of his or her financial need by more than $200. Hourly earnings must not be less than the Federal minimum wage.

Institutions have the discretion to use their allocation to support a variety of college work-study activities. Up to 10 percent of the allocation may be devoted to community service-learning jobs at a reduced rate of 10 percent required for the institutional contribution. Institutions may also operate a job location and development program, designed to locate and develop regular work-study and community service jobs for eligible students. In addition, up to 25 percent of the allocation may be used to provide jobs with private for-profit organizations.

Income contingent loans [ICL's]

The Committee recommends $4,880,000 for income-contingent loans, the same as the fiscal year 1991 appropriation, $5,120,000 less than the administration's request, and $120,000 less than the House allowance. This program provides awards to colleges and universities for use as capital to operate student loan programs with income-contingent repayments. Loans are made from a combination of a Federal contribution and an institutional match of $1 for every $9 Federal. The loans, which are made under federally prescribed conditions, are available to financially needy students, who will repay the loans on the basis of their aggregate loan debt and income during the repayment period. Students may borrow up to $2,500 each of their first 2 years of study, $3,500 the third year, and $4,500 in each of the two additional years, with an overall aggregate loan limit of $17,500. In 1991, loans averaged $2,200. At the level provided by the Committee, it is expected that approximately 10 institutions will continue to be supported in 1992 and loans will be available to roughly 2,900 students.

Perkins loans

The Committee recommends $156,000,000 for Federal capital contributions to Perkins student loan funds, which is the same as the House allowance and approximately the same as the fiscal year 1991 appropriation. The administration did not request funding for this program. Because of increased repayments to the revolving loan fund, the Committee believes its recommended appropriation will increase funds available for new loans by approximately $13,300,000 in 1992. An amount of $15,000,000 is recommended for loan cancellation payments, the same as the administration's request and $2,000,000 more than the House allowance. No appropriation was provided for loan cancellations in 1991, since adequate funds were available to the Department to make required payments.

The Perkins loan program provides long-term, low-interest (5 percent) loans to approximately 700,000 financially needy students to enable them to finance the costs of postsecondary education. Loans are made from an institution's revolving loan fund made up of a Federal capital contribution, which must be matched at no less than $1 for every $9 Federal, student payments on prior loans, and by Federal cancellation payments. In 1991, approximately 680,000 loans will be made, with an average loan size of $1,250.

Appropriations for loan cancellations reimburse institutional revolving funds for loans which are canceled by borrowers through the performance of statutorily specified types of public service, military service, or teaching in schools with high concentrations of disadvantaged students.

State student incentive grants

For the State student incentive grant program, the Committee is providing $76,000,000, which is $12,469,000 more than the fiscal year 1991 appropriation and $12,000,000 more than the House allowance. The administration did not request funding for this program.

Under this program, States must match Federal appropriations to provide State-based grant and work-study programs to financially needy postsecondary students. Grants and job earnings are limited to $2,500 per academic year for full-time students.

States may use up to 20 percent of their SSIG allotment in support of campus-based, work-learning jobs that are designed to improve the quality of life for community residents and that provide participating students with work-learning opportunities related to their educational or vocational goals. Work-learning jobs are subject to certain restrictions under the law. Earnings from work-learning activities may not be less than the Federal minimum wage.

GUARANTEED STUDENT LOANS (LIQUIDATING)

Appropriations, 1991	$5,381,422,000
Budget estimate, 1992	3,055,952,000
House allowance	3,105,711,000
Committee recommendation	3,105,711,000

The Committee recommends an appropriation of $3,105,711,000 for the "Guaranteed student loans [GSL] liquidating" account. This is $49,759,000 more than the administration's request, which included cost savings not yet authorized, and the same as the House allowance. The Committee recommendation is not comparable to the fiscal year 1991 GSL appropriation due to accounting changes required by the Federal Credit Reform Act of 1990 (Public Law 101–508). The act requires that, beginning in fiscal year 1992, GSL appropriations reflect the estimated full subsidy cost of new loans; that is, the present value of future costs of loans made in a given year. Program costs for loans made prior to September 30, 1991, must be accounted for separately. Therefore, the Committee's 1992 liquidating account recommendation provides funds to cover estimated loan subsidy costs during fiscal year 1992 only for pre–1992 loans; whereas, the 1991 GSL appropriation included funds to meet obligations of past and new loan borrowing. In 1992, new loan borrowing is requested in the GSL Program account.

The GSL programs in this account operate under permanent contract authority. Under such authority, appropriations are used to liquidate any legal obligations incurred, regardless of when they were incurred. The appropriation for the liquidating account thereby may include funds necessary to pay for any prior year shortfalls in addition to new funding needed for obligations incurred in fiscal year 1992.

In 1990, over $10,800,000,000 in GSL loans were made to nearly 4 million students. From the year guaranteed student loans were first authorized through 1990, a total of over $104,000,000,000 has been loaned to students, making guaranteed student loans the single largest source of Federal student aid.

GUARANTEED STUDENT LOANS PROGRAM

Appropriations, 1991	....
Budget estimate, 1992	$2,866,680,000
House allowance	2,866,680,000
Committee recommendation	2,947,765,000

The Committee recommends an appropriation of $2,947,765,000 for the Guaranteed Student Loans Program, $81,085,000 more than the administration's request and the House allowance, which reflected cost savings not yet enacted. There is no comparable fiscal year 1991 appropriation as this is a new account established by accounting requirements of the Federal Credit Reform Act of 1990, Public Law 101-508. That law requires that each year's appropriation to the GSL Program account reflect the net present value of all future year subsidy costs for the respective fiscal year's new cohort of loans. Prior to 1992, GSL appropriations were based only on costs that had to be covered in the year of the appropriation.

The Credit Reform Act also requires that beginning in 1992, the Federal administrative costs associated with a credit program be appropriated to that program account and separately identified from loan subsidy costs. Therefore, the 1992 recommendation for the GSL Program account includes the costs—both mandatory and discretionary—for administering the GSL Program. Prior to 1992, mandatory administration costs were part of the program appropriation and discretionary administration costs were appropriated to the Department's "Program administration" account. Federal funding for the GSL Program, except for the discretionary administration costs, is an entitlement.

Title IV of HEA, which authorizes guaranteed student loans, expires September 30, 1991. The GEPA extension applies through fiscal year 1992; reauthorization proposals are being considered by Congress.

New loan subsidies

The Committee recommends $2,749,121,000 for new loan subsidies for Stafford loans, supplemental loans for students [SLS], and PLUS loans (loans to parents of dependent students). This is $93,485,000 more than the administration's request and the House allowance.

These loan programs promote the availability of low-interest loans from banks and other lenders to students and their parents to help meet the costs of postsecondary education. This is accomplished through the provision of Federal reinsurance and interest subsidies.

The program is administered through State and private nonprofit guarantee agencies that insure loans directly, collect defaulted loans, and provide various services to lenders. To support the insurance of student and parent loans, the Federal Government provides guarantee agencies with loan advances; reinsurance payments for borrower default, death, disability, and bankruptcy; and administrative allowances.

The Federal Government also pays an interest subsidy to lenders, equal to the borrower's interest rate, on behalf of Stafford loan student borrowers while they are in school and during certain grace and deferment periods. To be eligible for this subsidy, students must demonstrate need. After entering repayment status, the borrower's interest obligation is generally 8 percent through the fourth year of repayment, and 10 percent thereafter. A quarterly Federal special allowance also is paid to participating lenders, which assures them a total yield equal to the most recent quarterly average 91-day Treasury bill rate plus 3.25 percentage points. Stafford loan student borrowers are charged a 5-percent origination fee that helps offset these Federal subsidies.

Stafford loans may be borrowed by eligible students, regardless of their school year or dependency status. Borrowing limits are tied to the extent of need—cost of attendance minus expected family contribution and other aid—as determined by an approved need analysis system. Maximum loan levels are set at $2,625 for first and second year undergraduates and $4,000 for other undergraduate students, with a $17,250 cumulative loan limit for undergraduates. Graduate students have an annual limit of $7,500 and a cumulative loan limit of $54,750, including undergraduate Stafford loan borrowing.

SLS loans are generally made to graduate and independent undergraduate students and PLUS loans are made to parents of dependent undergraduate students. Interest rates are higher than those for Stafford loans and the Federal Government does not pay the interest during in-school, grace, and deferment periods. Loan principal repayment begins 60 days after disbursement of the loan unless the borrower is eligible for a deferment. The interest rate for any award year (July 1 to June 30) is the lesser of 12 percent or the average 52-week Treasury bill rate for the 12 months preceding June 1 of the prior award year, plus 3.25 percentage points. SLS and PLUS loans have annual limits of $4,000 and cumulative limits of $20,000. No need analysis is required, but borrowing cannot exceed cost of attendance minus other aid.

Mandatory administrative expenses

The Committee recommends $158,644,000 for mandatory administrative expenses, the same amount requested by the House and $5,967,000 less than the administration's request. In prior years, these expenses were included as part of the total cost of the GSL Program.

Mandatory administrative expenses are those administrative costs required under the statute to be displayed separately in the program account and directly related to program obligations. Unlike the loan subsidy costs, these expenses reflect only the costs expected to be incurred in fiscal year 1992. They include supplemental preclaims assistance payments to guaranty agencies to reimburse them for such assistance provided to lenders, and the administrative cost allowance paid to guaranty agencies based on the loan volume they insure.

Federal administrative expenses

The Committee recommends $40,000,000 for Federal administrative expenses related to the GSL Program. This is $5,329,000 more than the comparable 1991 level, and $6,433,000 less than the administration's request and the House allowance.

This appropriation covers the Federal discretionary administrative expenses appropriated in prior years to the Department's "Program administration" account. These discretionary costs are now included in the program account pursuant to the requirement in the Federal Credit Reform Act of 1990. Funds appropriated under the GSL Program account for Federal administrative expenses will be used to reimburse the "Program administration" account for expenditures incurred in operating the GSL Program in fiscal year 1992, which include salaries and benefits, travel, printing, contracts (including contracted default reduction activities), and overhead expenses associated with the GSL Program.

HIGHER EDUCATION

Appropriations, 1991	$762,638,000
Budget estimate, 1992 amended	784,501,000
House allowance	821,438,000
Committee recommendation	810,557,000

The Committee recommends an appropriation of $810,557,000 for the "Higher education" account. This is $47,919,000 more than the fiscal year 1991 appropriation, $26,056,000 more than the administration request, and $10,881,000 less than the House allowance. These amounts do not reflect a President's budget amendment proposed in this account to support America 2000 activities. This budget amendment is considered elsewhere in this bill.

The Department of Education's budget estimates include $778,096,000 for activities authorized by the Higher Education Act based on the administration's reauthorization plans. The remainder is for non-HEA activities. The authorizing committee is currently considering HEA reauthorization, but a new act will not be passed in time to affect this budget. Therefore, fiscal year 1992 Committee recommendations for funding are based on current law.

Aid for institutional development

The Committee recommends $194,873,000 for institutional development, which is $9,962,000 less than the fiscal year 1991 appropriation, $38,000 more than the administration's request, and $14,627,000 less than the House allowance. Of the total, the Committee recommends $87,831,000 for strengthening institutions (part A); $87,831,000 for strengthening historically black colleges and universities (part B), $11,711,000 for postgraduate section 326 institutions; and $7,500,000 for endowment challenge grants (part C).

Strengthening institutions.—The part A discretionary grants support 1-year planning grants and multiyear development grants for institutions with low average educational and general expenditures per student and a significant percentage of financially needy students.

Historically black colleges and universities.—Part B authorizes formula grants to historically black colleges and universities that may be used to establish or strengthen physical plants, financial management, academic resources, and endowments. Section 326 discretionary grants are directed to five historically black postgraduate institutions for similar purposes. Authorizing legislation sets aside $3,000,000 of the section 326 funds for the Morehouse School of Medicine. Any section 326 grant above $500,000 must be matched dollar-for-dollar.

Endowment challenge grants.—Institutions eligible for part A or B grants may also apply for part C endowment challenge grants, which may not exceed $500,000 or be less than $50,000 and generally must be matched dollar-for-dollar by the institution. Part C funds remain available until expended.

Fund for the improvement of postsecondary education

The Committee recommends $15,000,000 for the fund for the improvement of postsecondary education. This amount is $361,000 more than the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance.

The fund stimulates improvements in education beyond high school by supporting exemplary, locally developed projects that have potential for addressing problems and recommending improvements in postsecondary education. The fund is administered by an independent board that provides small discretionary grants and contracts awarded competitively to a variety of postsecondary institutions and agencies, including 2- and 4-year colleges and universities, State educational agencies, community-based organizations, and other institutions and organizations concerned with education beyond high school.

Minority science improvement

The Committee recommends $6,000,000 for the minority science improvement program, $145,000 more than the fiscal year 1991 appropriation, $101,000 less than the administration request, and the same as the House allowance.

This program provides discretionary grants to institutions with minority enrollments greater than 50 percent to purchase equipment, develop curricula, and support advanced faculty training. Grants are intended to improve science education programs and increase the number of minority students in the fields of science, mathematics, and engineering.

Innovative projects for community services

The Committee includes $1,463,000 for innovative projects for community services, which is the same as the House allowance and $1,000 less than the fiscal year 1991 appropriation. The administration proposed consolidating these projects with the student literacy corps, which requires a change in the basic law. The Committee is not accepting that proposal. Under this program, grants and contracts are made to encourage students to participate in community service projects in exchange for educational assistance or financial assistance to complete their postsecondary education.

Student Literacy Corps

The Committee recommends $5,367,000 for the Student Literacy Corps, which is the same as the fiscal year 1991 appropriation and the House allowance. The administration proposed consolidating the Student Literacy Corps with the innovative projects for community services. The Committee has not accepted that proposal.

The Student Literacy Corps promotes the development of literacy corps programs at institutions of higher education. Institutions that have participated in community service activities may receive discretionary grants to pay for the administrative costs of the programs and to pay stipends for student coordinators. Under the programs, undergraduate students provide tutoring services to educationally or economically disadvantaged individuals in return for academic credit.

International education and foreign language studies—domestic programs

The bill includes a total of $49,170,000 for international education programs, which is an increase of $3,303,000 over the fiscal year 1991 appropriation and the administration's request, and $3,830,000 less than the House allowance.

The Committee recommends $30,170,000 for domestic program activities related to international education and foreign language studies, including international business education, under title VI of the Higher Education Act. This is an increase of $1,500,000 over the fiscal year 1991 appropriation and the administration's request, and is $3,830,000 less than the House allowance. Domestic programs include: national research centers, international studies and foreign language programs, research projects, international business education projects and centers, language resource centers, and foreign language and area studies fellowships. The proportions of title VI funds that are used for each of these purposes, as well as others that are authorized under title VI but not currently funded, are determined at the discretion of the Secretary of Education.

Of the amount appropriated, the Committee has provided $1,487,000 for language resource centers. This amount will support three existing centers and allow for establishment of one new center. The new center should demonstrate a partnership between a State education agency and a university to provide a model language resource center for elementary school foreign languages education, and to provide for assessment of oral foreign language skills. The center should be located in a State with participation of not less than 45 percent of high school students in foreign language courses.

In addition, of the amount provided, the Committee intends that $7,500,000 be for the international business education center program. This is $2,053,000 more than the fiscal year 1991 appropriation and the administration's request and $1,053 more than the House allowance.

International education and foreign languages—overseas programs

The bill includes $6,000,000 for overseas programs authorized under the Mutual Educational and Cultural Exchange Act of 1961, popularly known as the Fulbright-Hays Act, an increase of $145,000 over the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance. Under these programs, grants are provided for group projects abroad, faculty research abroad, doctoral dissertation research abroad, and special bilateral projects. Unlike other programs authorized by the Fulbright Hays Act, and administered by the U.S. Information Agency or other Federal agencies, this Department of Education program focuses on training American instructors in order to improve foreign language and area studies education in the United States.

Foreign language and area studies fellowships

The Committee recommends $13,000,000 for foreign language and area studies fellowships, authorized under title VI of the Higher Education Act. This is an increase of $1,658,000 over the 1991 appropriation and the administration's request, and the same as the House allowance. These funds are distributed to institutions of higher education receiving title VI institutional grants to assist graduate students in foreign language and area studies programs. The budget request proposed combining these fellowships with a number of other programs into a new national graduate fellowship program. The Committee has not accepted this proposal.

Cooperative education

The Committee has included $14,000,000 for cooperative education, which is $825,000 more than the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance.

The Cooperative Education Program funds discretionary grants for projects providing work experiences for students that relate to their chosen fields and provide earnings to help finance their college educations.

Law school clinical experience

The Committee includes $8,000,000 for law school clinical experience, $2,145,000 over the fiscal year 1991 appropriation and the same as the House allowance. The administration did not request funding for this program. This program, funded since 1978, supports discretionary grants to law schools for the administrative costs of expanding or establishing clinical experience programs for law students. The 1991 funding level will support an estimated 75 grants, serving approximately 1,560 students.

Interest subsidy grants

The Committee recommends $19,412,000 for interest subsidy grants, which is $984,000 less than the fiscal year 1991 appropriation and the same as the administration's request and the House allowance.

This appropriation is required to meet the Federal commitment to pay interest subsidies on 499 loans made in past years for the construction, renovation, and equipping of postsecondary academic facilities. No new interest subsidy commitments have been entered into since 1973; however, subsidy payments on existing loans are expected to continue until the year 2013.

Assistance to Guam

The Committee recommends $500,000 for assistance to Guam, which is $12,000 more than the fiscal year 1991 appropriation, and the same as the House allowance. The administration did not request funds for this purpose.

Assistance to Guam is authorized to provide partial reimbursement to the University of Guam and Guam Community College for costs incurred in providing postsecondary education services to nonresident Micronesian students.

Robert A. Taft Institute of Government

The Committee has included $550,000 for the Robert A. Taft Institute of Government, which is $133,000 less than the 1991 appropriation and the same as the administration's request and the House allowance.

A dollar-for-dollar matching grant is provided to the Institute to assist in developing education programs to train elementary and secondary teachers in the principles of democracy and the governmental processes of the United States.

Magnuson endowment

The Committee has included $2,000,000 for the Warren G. Magnuson Institute for Biomedical Research and Health Professions Training at the Health Sciences Center at the University of Washington, as authorized by Public Law 100-202. These funds will be used to support the activities of the Institute and for other health and education related activities, including supporting a chair and archives at the University and bestowing awards on deserving researchers and students. During his tenure in the U.S. Senate, which lasted from December 14, 1944, through January 3, 1981, Senator Magnuson made the Nation's behavioral and biomedical programs his highest priority. The Committee believes that this recognition is most appropriate.

Bethune-Cookman

The bill includes $300,000 for a grant to Bethune-Cookman College as authorized by section 775, part G, title VII of the Higher Education Act. The basic law authorizes a grant of $6,200,000 to this school to improve its facilities. In fiscal year 1988, a grant of $5,900,000 was appropriated. The additional $300,000 recommended in the bill completes Federal financing for this project.

Urban community service funds (XI-B)

The Committee recommends $10,000,000 for urban community service funds, as authorized under the Higher Education Amendments of 1986. This is a new activity in fiscal year 1992.

This program fosters and encourages the use of the skills, talents, and expertise available in urban universities to serve the needs and address the problems of the urban areas in which they are located. Funds will support cooperative projects to provide urban areas with applied research, planning services, specialized training, and other services to address their high priority needs.

Special programs for the disadvantaged (TRIO)

The Committee recommends $385,249,000 for special programs for the disadvantaged, commonly known as TRIO. This amount is $51,491,000 more than the fiscal year 1991 appropriation and the same as the House allowance. The administration's budget request is premised on a major restructuring of the TRIO programs and two other programs—school, college, and university partnerships, and minority participation in graduate education. The Committee has not accepted that proposal.

The TRIO programs include: Upward Bound, which offers disadvantaged high school students academic services to develop the skills and motivation needed to continue their education; student support services, which provides remedial instruction and counseling to disadvantaged college students to help them complete their postsecondary education; Talent Search, which identifies and counsels young persons regarding opportunities for completing high school and enrolling in postsecondary education; educational opportunity centers, which provide information and counseling on available financial and academic assistance to adults who are low income and first generation college students; and the Ronald E. McNair postbaccalaureate achievement program, which provides research internships, seminars, tutoring, and other activities to encourage disadvantaged college students to enroll in postgraduate programs. The staff training program supports training activities for TRIO project staff.

In our report accompanying the fiscal year 1991 appropriations bill we noted the Committee's concern regarding the Department's procedures for distributing funds among TRIO grantees. The Committee shares the administration's commitment to expanding opportunities for postsecondary education for disadvantaged students and sees the TRIO programs as a very viable means of doing so. However, this Committee is deeply concerned that no clear guidelines are available to assure fair and equitable treatment of each institution and agency applying for and receiving TRIO funds.

Unexplained discrepancies have been brought to our attention in the reading and scoring of TRIO proposals, in the awarding of prior experience points, and in the determination of increases awarded to individual projects. As an example, adequate responses have not been provided to our requests for information regarding the decision not to continue funding for the University of Northern Iowa's Educational Opportunity Center.

The Committee reaffirms its view that the provision of inflationary increases for all continuing TRIO grantees should be the highest priority. In this regard, neither this Committee nor the authorizing committees distinguish between continuing grantees competing for funds due to the close of a grant cycle and noncompeting grantees.

The Committee also continues to expect that the Department will consult with members of the higher education community, particularly those with expertise on the TRIO programs as it examines its procedures and as it develops long- and short-range spending plans.

Robert C. Byrd honors scholarships

The Committee has included $9,642,000 for the Robert C. Byrd Honors Scholarship Program, which is $371,000 more than the fiscal year 1991 appropriation and $371,000 more than the administration's request and the House allowance.

The Robert C. Byrd Honors Scholarship Program is designed to promote student achievement and to recognize exceptionally able students who show promise of continued excellence. It is the only scholarship program within the Department of Education through which grants are awarded solely on merit. The program provides $1,500 nonrenewable scholarships for the first year of undergraduate study to high school graduates who have demonstrated outstanding academic achievement. Funds are allocated to State education agencies based on each State's school-aged population. The State education agencies select the recipients of the scholarships in consultation with school administrators, teachers, counselors, and parents.

Funding for this program was initiated in fiscal year 1987. Since its inception, the program has provided approximately 25,400 scholarships to outstanding young scholars.

National science scholars

The Committee recommends an appropriation of $4,500,000 for national science scholars, which is $3,524,000 more than the fiscal year 1991 appropriation, $5,500,000 less than the administration's request, and the same as the House allowance.

As authorized in title VI, part A of the Excellence in Mathematics, Science, and Engineering Act of 1990, the National Science Scholars Program encourages achievement in the sciences by providing scholarships to graduating high school students who have excelled in the physical, life and computer sciences, mathematics, and engineering. The scholarships would recognize the academic achievement of these students and would encourage these students to continue their education in these academic areas at the postsescondary level.

Paul Douglas teacher scholarships

The Committee recommends $15,000,000 for the Paul Douglas teacher scholarships, $361,000 more than the fiscal year 1991 appropriation and the administration's request, and the same as the House allowance.

This program encourages outstanding high school graduates to pursue teaching careers in elementary and secondary education. State higher education agencies receive formula grants to provide up to $5,000 per year to recipients chosen on the basis of merit. Recipients must agree to teach for 2 years per year of supported study or repay the amount of the scholarship with interest.

Patricia Roberts Harris graduate fellowships

The Committee recommends $17,600,000 for the Patricia Roberts Harris graduate fellowships, which is $34,000 more than the fiscal year 1991 appropriation and the same as the House allowance. The administration proposed consolidating these fellowships and a number of other targeted student assistance programs into a program of national graduate fellowships. The Committee has not accepted this proposal.

This program provides discretionary grants to postsecondary institutions to assist persons from groups that have been traditionally underrepresented in colleges and universities to undertake graduate and professional study. The institutions, in turn, award fellowships to students who demonstrate financial need and who plan to pursue advanced degrees in academic areas of high national priority.

Patricia Roberts Harris public service fellowships

The Committee recommends $3,200,000 for the Patricia Roberts Harris public service fellowships, which is $2,000 more than the fiscal year 1991 appropriation, and the same as the House allowance. The administration proposed consolidating these fellowships and a number of other targeted student assistance programs into a program of national graduate fellowships. The Committee has not accepted this proposal.

Grants are awarded on a competitive basis to institutions of higher education for fellowships in order to increase the number of graduate students trained for leadership and management positions in public service.

Jacob K. Javits fellowships

The Committee includes $8,000,000 for Jacob K. Javits fellowships, which is $193,000 more than the fiscal year 1991 appropriation and the same as the House allowance. The administration proposed consolidating these fellowships and a number of other targeted student assistance programs into a program of national graduate fellowships. The Committee has not accepted this proposal.

This program provides fellowships to students for graduate study in the arts, humanities, and social sciences. The fellowships are awarded through a national competition and recipients pursue graduate study at the institutions of their choice.

Graduate assistance in areas of national need

The Committee recommends $25,000,000 for graduate assistance in areas of national need, which is $115,000 more than the fiscal year 1991 appropriation and $5,000,000 less than the House allowance. The administration proposed consolidating these fellowships and a number of other targeted student assistance programs into a program of national graduate fellowships. The Committee has not accepted this proposal.

The Secretary awards grants to graduate academic departments and programs in areas of study determined to be of national need. Suggested subjects include mathematics, physics, biology, chemistry, engineering, and foreign languages. Grants must be used for graduate student fellowships. Recipients must have financial need, excellent academic records, and plans to pursue a teaching or research career. Graduate students may receive assistance for no more than 5 years.

Minority participation in graduate education

The Committee recommends $5,953,000 for minority participation in graduate education, which is the same as the fiscal year 1991 appropriation and $127,000 more than the House allowance. Under the administration's request, this program was consolidated into one of the postsecondary consolidations proposed under the HEA reauthorization. Therefore, there is no separate funding request for it from the President.

This program provides grants to institutions of higher education to support fellowship aid to needy undergraduate minority students to help them prepare for graduate study. Funds are used for summer research internships, seminars, and other educational experiences, and can cover stipends, room and board costs, transportation, and tuition costs.

Veterans' educational outreach

The Committee recommendation includes $2,733,000 for veterans' educational outreach, the same as the fiscal year 1991 appropriation and $33,000 more than the House allowance. The administration did not request funding for this program.

This program provides formula grants to postsecondary institutions to help support offices of veterans' affairs that provide outreach, recruitment, special educational services, and counseling. Funds are allocated on a formula basis.

Legal training for the disadvantaged

The Committee has recommended $3,045,000 for legal training for the disadvantaged, which is $117,000 more than the fiscal year 1991 appropriation and $45,000 more than the House allowance. The administration did not request funding for this program.

Legal training for the disadvantaged supports pre-law school training and scholarships for individuals from disadvantaged backgrounds to help them enter and complete law school. Funds are awarded by a noncompetitive grant to the Council on Legal Education Opportunity [CLEO], which administers the program and receives a large percentage of its funds from private sources.

School, college, and university partnerships

The Committee recommends $4,000,000 for the School, College, and University Partnerships Program, which is $96,000 more than the fiscal year 1991 appropriation and the same as the House allowance. The administration requested consolidating this program with a number of the special programs for the disadvantaged. The Committee does not accept this proposal.

The School, College, and University Partnerships Program promotes joint projects between colleges and universities and high schools serving low-income students which will increase students' academic skills and enhance their prospects for postsecondary education or employment.

HOWARD UNIVERSITY

Appropriations, 1991	$195,215,000
Budget estimate, 1992	190,932,000
House allowance	212,960,000
Committee recommendation	199,131,000

The Committee recommends an appropriation of $199,131,000 for Howard University. The recommendation is $8,199,000 more than the administration's request, $13,829,000 less than the House allowance, and $3,916,000 more than the fiscal year 1991 appropriation.

Howard University offers undergraduate, graduate, and professional degrees through the 18 schools and colleges which comprise the university. The university also administers the Howard University Hospital, which provides both inpatient and outpatient care, as well as training in the health professions. Federal funds from this account support about 67 percent of the university's educational and general costs, excluding the hospital. In addition, Howard University students receive an estimated $26,460,000 through Federal student aid programs, and the university receives an additional $23,100,000 through other Federal grant and research programs.

Of the total amount recommended, the Committee provides $158,515,000 for Howard's academic program, $5,000,000 more than the fiscal year 1991 appropriation, the administration's request, and the House allowance. The Committee has also provided $4,500,000 for the endowment for Howard University, which is the same as the administration's request, and $1,572,000 more than the fiscal year 1991 appropriation and the House allowance. It is hoped that the university will be able to match this amount of endowment funding in 1992, although bill language has been included to make these funds available until expended, should the university require additional time to raise matching amounts. For research, the Committee has provided $4,616,000, the same amount as the fiscal year 1991 appropriation, the administration's request, and the House allowance. For Howard University Hospital, $29,500,000 has been provided, $1,199,000 more than the fiscal year 1991 appropriation, the administration's request, and the House allowance. Finally, for emergency construction needs at Howard, the Committee has provided $2,000,000, which is $2,000,000 more than the administration's request, $3,855,000 less than the fiscal year 1991 appropriation, and $21,600,000 less than the House allowance.

The Committee has revisited the issue of foreign student tuition surcharges at Howard. Upon a showing by Howard that a student is unable to pay the tuition surcharge, and that the student has made a good faith effort to secure aid through his or her own government or other sources, the Committee believes that Howard should be allowed to waive the surcharge for that student. The Committee encourages the Department to work with Howard to develop criteria for waiver. In addition, the Committee directs Howard to provide the Committee with information on the financial status of each foreign student attending Howard during the 1991–92 school year, by December 31, 1991.

COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS (LIQUIDATING)

Appropriations, 1991	$37,726,000
Budget estimate, 1992	....
House allowance	....
Committee recommendation	....

The "College housing and academic facilities loans (liquidating)" account will use $3,598,000 for interest subsidy payments to the Treasury on college housing and academic facilities loans made to institutions from 1987 through 1991. This is the Department's estimate of these mandatory payments for 1992. In 1991, $29,277,000 in borrowing authority was provided to support new loans and $8,449,000 was needed for interest subsidy payments. As a result of the Federal Credit Reform Act of 1990, beginning in 1992, no new loan obligations may be made from this account. Additionally, amounts required for payment to the Treasury each year will be provided through permanent appropriations authority, and, as such, do not require congressional appropriation. The Committee has provided bill language, however, to allow the Department to continue to manage the existing portfolio of loans.

This account was created in 1987 pursuant to the Higher Education Amendments of 1986 and supports financing for the construction and renovation of postsecondary housing and other academic facilities through direct, subsidized loans made from a general fund. Loans were provided to institutions at interest rates no higher than 5.5 percent and for terms of not more than 30 years. The Department has annually provided new loans to institutions since 1987 by borrowing from the Treasury, and until 1992, annual appropriations from Congress were required to pay the interest subsidy on the loans.

While the Committee has not provided new borrowing authority within this account, facility renovation and construction assistance is expected to be available through the College Construction Loan Insurance Association.

COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS

Appropriations, 1991	....
Budget estimate, 1992	....
House allowance	....
Committee recommendation	$8,105,000
(Loan limitation)	(30,000,000)

The Committee appropriates a total of $8,105,000 for the College Housing and Academic Facilities Loans Program [CHAFL], including $7,539,000 for loan subsidies and $566,000 for the Federal costs of administering the program. The loan subsidies provided are estimated to support $30,000,000 in new 1992 loans through the life of those loans. Additional appropriations will be available in future years if warranted by subsidy reestimates. The Committee has provided appropriation language so that unliquidated obligations shall not be canceled, as would otherwise be required by the account closing provisions of Public Law 101-510, the National Defense Authorization Act of 1991. The House did not provide any new loan limitation and, therefore, does not recommend any funding for loan subsidy costs or recommend separately displaying Federal administration costs.

The "CHAFL Program" account is created pursuant to the Federal Credit Reform Act of 1990 to measure more accurately the cost of direct construction loans and identify these costs on a budgetary basis equivalent to other Federal spending. The account reflects financing for the post-1991 loans made for construction and renovation of postsecondary housing and other academic facilities. These subsidized loans are made directly to institutions. Loans are provided to higher education institutions at interest no higher than 5.5 percent and for terms of not more than 30 years. The Department borrows from the Treasury the total amount of the loans made each year, but congressional appropriations are required to pay the subsidy cost of the loans and to pay for the Federal administration cost of the program. Including the costs of the Federal administration of the CHAFL Program in this account is a requirement of the Federal Credit Reform Act of 1990.

EDUCATION RESEARCH, STATISTICS, AND IMPROVEMENT

Appropriations, 1991	$233,418,000
Budget estimate, 1992	260,751,000
House allowance	233,879,000
Committee recommendation	259,773,000

The bill includes $259,773,000 for educational assessment, statistics, research, and improvement programs. This amount is $26,355,000 more than the 1991 appropriation, $978,000 less than the administration's request, and $25,894,000 more than the House allowance. This account supports education research, statistics, and assessment activities authorized by sections 405 and 406 of the General Education Provisions Act, as well as a variety of other discretionary programs for educational improvement. This is the maximum amount expected to be available for these activities in this account. No funds may be transferred to this account except as specifically authorized in this report.

Research

The Committee recommends $71,500,000 for educational research, an increase of $6,786,000 over fiscal year 1991, $2,796,000 less than the administration's request, and $500,000 more than the House allowance. Research activities are conducted by two units within the Office of Educational Research and Improvement: Office of Research and Programs for the Improvement of Practice. Projects are carried out directly or through grants or contracts to institutions of higher education, public or private organizations, institutions, agencies, or individuals.

The research program provides support for national education research and development centers, regional education laboratories, the Educational Resources Information Center [ERIC] system, and field-initiated research. The education research and development centers represent a nationwide network of centers conducting long-term research and development; these centers are based in universities and are responsible for studying specific areas of national concern. Ten regional educational laboratories determine the educational research and development needs of their specific regions, and help meet those needs through applied research and technical assistance. The ERIC system collects, indexes, abstracts, analyzes, and disseminates information on education through a series of clearinghouses that focus on specific areas of education. Field-initiated research consists of competitive awards to support the work of independent scholars; 12 such awards were made in 1990. These funds also support an ongoing rural education initiative operated through each of the laboratories.

The Committee bill provides the following suballocations of educational research funding:

Research centers	$25,300,000
Regional laboratories	35,049,000
(Rural program, nonadd)	(10,000,000)
ERIC system	7,175,000
Field initiated studies	976,000
Discretionary	3,000,000

The Committee has included $35,049,000 for continuation by the regional educational laboratories of the work defined for them by their respective governing boards. The amount recommended by the Committee is an increase of $4,160,000 over the administration's budget request. Of this total, $10,000,000 is to be used by the laboratories for rural programs, distributed according to the proportion of total rural funding each laboratory was provided in fiscal year 1991. The remainder of the additional funds provided shall be divided equally among the 10 regions, creating a national laboratory program that will disseminate and exchange programs proven to work within a region, adapt them for use in new State and school contexts in other regional laboratory territories, and establish a collaborative network among the regional laboratories for purposes of pooling resources, talent, and programs. The Committee expects that the total amount appropriated will be awarded to the regional educational laboratories contractors not later than December 1, 1991, and that none of the funds will be retained by the Department of Education for any other purpose.

The Committee also urges the Department to work with the regional laboratories to utilize resources in ways that will be helpful to local educators and State education policymakers that are operating and designing programs to increase the mathematics and science knowledge of America's school children.

The Committee is pleased with the efforts of the Department to be responsive to the pressing educational needs of the Pacific basin region and urges that during the coming year the Pacific Basin Educational Laboratory receive appropriate support. The lab is no longer a subregional facility and has high transportation and developmental costs and should be supported at a level comparable to the other major regional laboratories.

Statistics

The Committee recommends $44,313,000 for the activities of the National Center for Education Statistics (exclusive of the national assessment of educational progress), the same as the fiscal year 1991 appropriation, $7,661,000 less than the administration's request, and $5,687,000 less than the House allowance.

The center collects, analyzes, and reports statistics on education in the United States. Activities are carried out directly and through grants and contracts. The center collects data on educational institutions at all levels, longitudinal data on student progress, and data relevant to public policy from special surveys. Technical assistance to State and local education agencies and postsecondary institutions is also provided by the center.

The Committee has become aware of the planning for the use of center data bases for State and local educational policy and planning in cooperation with the network of regional educational laboratories. The Committee is supportive of this development, and requests from the Department progress reports on the center's data outreach efforts through the regional educational laboratories. These emerging data efforts are important to provide data and information about many of the new thrusts in education, such as the rural education initiative, the long-term effects of the early childhood education and care programs, and school restructuring and reform. The Committee is also aware of the research needs of the center in creating and refining important national data systems and is supportive of their use of the research centers, when the research centers are in agreement, to meet this need.

Assessment

The Committee recommends $20,000,000 for assessment. This amount is $789,000 more than the 1991 appropriation, $8,086,000 less than the administration request, and $8,000,000 less than the House allowance.

Funds provided for assessment activities are administered by the National Center for Education Statistics and go toward the continuation and expansion of the national assessment of educational progress [NAEP]. The primary goal of NAEP is to determine and report the status and trends over time in educational achievement, subject by subject.

Fund for innovation in education

For the fund for innovation in education [FIE] the Committee recommends $27,737,000, the same as the fiscal year 1991 appropriation and the administration's request, and $8,737,000 more than the House allowance. Under the fund for innovation in education, the Secretary is authorized to identify promising innovative approaches to education.

FIE funds may be used for five separate activities in the area of educational improvement:

The Innovation in Education Program provides funding for projects that show promise of identifying and disseminating innovative educational approaches at the preschool, elementary, and secondary levels. Funds are provided through grants to or contracts with State education agencies, local education agencies, institutions of higher education, or other private or public organizations.

The Educational Technology Program authorizes the development of educational radio and television programming for use by elementary and secondary schools, together with programs that use telecommunications and video resources for the instruction of students and teachers.

The Computer-Based Instruction Program provides funds for grants and contracts for projects that expand and strengthen computer education resources available in elementary and secondary schools. Funds may be used for the purchase of computer hardware and software for instructional purposes and for teacher training to expand the use of computers in curricula. Grantees may use no more than 25 percent of their awards for the purchase of computer hardware. The Committee directs that not less than $5,250,000 be allocated for this program.

The Committee directs the Department of Education to make a diligent effort to inform disadvantaged school districts of the availability of these funds and to provide technical assistance to school districts seeking aid in preparing applications for funding. Districts with large numbers of disadvantaged students stand to gain significantly from expanded computer education resources. The Committee understands that fiscal year 1991 funding was used for continued support of existing grantees. For fiscal year 1992, the Department should award new grants to worthy new projects as well as continue to fund existing projects where merited.

The Comprehensive School Health Education Program provides funds for assistance to State and local education agencies for a broad variety of activities related to improving health education for elementary and secondary students. Activities may include programs providing information on nutrition, personal health and fitness, disease prevention, accident prevention, and community and environmental health. The Committee directs that not less than $4,500,000 be allocated for this program.

The Innovative Alcohol Abuse Education Program provides funds for the development of materials and programs of alcohol abuse education. Emphasis is placed on projects that benefit children in grades 5 to 8 who are children of alcoholics. Grants also are provided for innovative programs to inform educators about the special needs of such children.

The Committee is aware of the need to provide technical assistance to local school districts attempting to restructure their elementary and secondary school systems. The Committee urges the Department to fund an Institute for the Reinvention of Education to provide leadership and technical assistance in the design, development, implementation, and evaluation of innovative educational environments.

The Committee is impressed that already the Children's Television Workshop has been able to raise $15,000,000 from the private sector to support its reading and writing project targeted toward 6- to 9-year-olds. To follow up on last year's allocation for the Children's Television Workshop reading and writing project, the Committee has included an additional $2,000,000 for this program to help to meet the Nation's education goals.

The Committee recognizes that efforts to improve and expand the instruction of foreign languages at all levels of education need to be bolstered, and has again included $1,000,000 for critical language training activities.

Fund for the improvement and reform of schools and teaching

The Committee has provided $9,250,000 for the fund for the improvement and reform of schools and teaching [FIRST]. This is $355,000 more than the fiscal year 1991 appropriation and the House allowance and $6,443,000 more than the administration's request. Within the amount provided, $5,495,000 shall be for the Grants for Schools and Teachers Program and $3,755,000 shall be for the Family-School Partnerships Program. This distribution of funds is consistent with the authorizing legislation, which requires that one-third of the funds appropriated to this program be reserved for family-school partnerships.

The Grants for Schools and Teachers Program awards discretionary grants and contracts to a variety of institutions, including individual schools, to improve educational opportunities for and performance of elementary and secondary school teachers and students. Priority is given to projects that benefit schools or students with below-average academic performance, projects that will lead to increased access for all students to a high-quality education, and projects that develop or implement systems for providing incentives for improved performance. At least 25 percent of the total FIRST appropriation must be used for school-level projects involving an individual school or a consortium of schools.

The grants for schools and teachers under the FIRST fund, although relatively small, is an important component in the efforts to improve the educational performance of our Nation's students. The Committee is concerned about the time students spend before and after school hours without adult supervision and the impact of unsupervised time on educational performance. Approximately 2 to 7 million children do not have adult supervision for their activities before or after school hours. In a 1984 Harris poll, teachers and parents ranked a lack of supervised extended school days as the foremost factor contributing to poor student achievement. The need for these programs cuts across racial, ethnic, and economic lines.

The Committee believes that grants for school and teachers funding should be used in part for the purpose of providing education-related programs to school-age children as an extension of the school day and the school year. Education-related activities could include remedial classes, tutoring, mentoring, arts, dance, drama and music, and community service. At the same time, these programs will provide information on successful programs that enhance student achievement.

The Family-School Partnerships Program awards demonstration grants to local education agencies that are eligible for chapter 1 funding for the development of innovative family-school educational partnership activities. Activities for which funds may be used include training programs for families and teachers, hiring and training personnel to coordinate family involvement activities, and the development or purchase of educational materials for home use by parents to reinforce classroom instruction.

The Committee is aware of the collaborative effort between the Barnet School and the Foodworks Program in Barnet, VT. This innovative project, called Common Roots, integrates science, social studies, language arts, and nutrition education through hands-on learning activities. The Committee encourages the Department of Education to support this type of innovative effort through its fund for the improvement and reform of schools and teaching.

Eisenhower mathematics and science education

The Committee recommends $18,000,000 for Eisenhower mathematics and science education national programs, $6,289,000 more than the fiscal year 1991 comparable level, $3,289,000 more than the administration's request, and $4,000,000 more than the House allowance.

This program provides grants and cooperative agreements for projects of national significance in math and science instruction. Projects may be designed to improve instruction, provide teacher training, increase the access of underserved and underrepresented students to such programs, or disseminate information about exemplary programs of math and science instruction.

For 1992, the Committee urges the Department to support projects to demonstrate strategies for significantly improving science and mathematics education for elementary and secondary schools, including further development and demonstration of major curriculum reforms.

The Committee also urges the Department to place a strong emphasis on strengthening the connections among State and local agencies and supporting their capacities to use formula grant funds effectively for professional development.

The Nation's future economic prosperity depends upon the mathematical and scientific expertise of its people. Indeed, attainment of premiere status worldwide in mathematics and science achievement is one of our national educational goals. The Committee believes that the effectiveness of the Eisenhower Mathematics and Science Program can be important in reaching that goal.

Of the amount appropriated, the Committee recommends $6,000,000 for a National Clearinghouse for Science, Mathematics and Technology Education Materials, as authorized by the Excellence in Mathematics, Science and Engineering Education Act of 1990. The clearinghouse will maintain a permanent repository of mathematics and science education instructional materials and programs for elementary and secondary schools; disseminate information, programs and instructional materials to the public, information networks, and regional consortiums; and coordinate with existing data bases containing mathematics and science curriculum and instructional materials.

The Committee is concerned that our economic future and national security are threatened by the failure of our Nation's school system in educating our elementary and secondary students in the science and mathematics skills necessary to succeed in an advanced technological society. Through a fully developed telecommunications education network, student access to science and mathematics curriculum, including those students in remote locations, could be greatly expanded.

The Committee has included $400,000, within the funds appropriated, for the development and expansion of an interactive telecommunications/computer education network linking satellite delivery systems with computer conferencing capability to provide high-quality instruction and to allow students to interact with scientists on location. Such a network would enable students in interior valleys to explore tidal pools, for example, and those in cities to experience diverse geological phenomena. This model program should be built upon existing technology systems (telephone, computer, word processing, data base management, and satellite telecommunications systems) to demonstrate the possibility of using the new technology to further science and mathematics education. This is especially important for regions of great climatic and geographic diversity with isolated educational communities. Preference in selecting models should be given to programs that are ongoing and that will be continued after Federal support ends.

Regional mathematics and science consortia

The Committee recommends $15,000,000 for regional mathematics and science education consortia; $300,000 was provided for this effort under the State grant program last year. This program was authorized by the Excellence in Mathematics, Science and Engineering Education Act of 1990, supports grants and contracts for the establishment and operation of regional mathematics and science consortia responsible for disseminating exemplary instructional materials. These consortia would also provide technical assistance for the implementation of innovative teaching methods and assessment tools for use by elementary and secondary school students, teachers, and administrators.

National diffusion network

For the national diffusion network [NDN], the Committee recommends $14,700,000, $549,000 more than the fiscal year 1991 appropriation and the administration's request and $700,000 more than the House allowance.

NDN facilitates school improvement by identifying and disseminating information about programs that work, bringing alternatives to the attention of educators throughout the Nation who are interested in improving their education programs, and providing training and followup technical assistance for those who decide to adopt a particular program. A program effectiveness panel reviews programs seeking inclusion in the NDN. The review focuses solely on the efficacy and transferability of the program.

In 1992, funds should support about 91 developer/demonstrators, including 33 new grantees and the continuation of 58 others. Four dissemination process projects would also be supported. Most of these projects address one or more of the national education goals.

The Committee expects the Department to use a portion of the funds appropriated to disseminate exemplary mathematics and science education programs.

Blue ribbon schools

For blue ribbon schools, the Committee recommends $885,000, the same as the fiscal year 1991 appropriation and the administration's request. The House did not provide funding for this program.

This program provides the Secretary with the authority to conduct competitions to recognize schools and school programs for their high quality. Schools or programs are to be selected solely on merit. The Secretary's elementary and secondary school recognition programs are conducted in alternate years. In 1992, exemplary elementary schools will be recognized.

Gifted and talented students education

The Committee has included $9,732,000 for the Javits gifted and talented students education program. This amount is the same as the fiscal year 1991 appropriation, the administration's request, and the House allowance.

This program authorizes awards to State and local education agencies, institutions of higher education, and public and private agencies for a variety of demonstration and training activities designed to identify and meet the special educational needs of gifted and talented students. Priority is given to projects that identify and serve gifted and talented students who are economically disadvantaged, limited English proficient, or handicapped, and to statewide or regional projects. A portion of the funds are set aside for a National Center for Research and Development in the Education of Gifted and Talented Children and Youth which researches methods and techniques for identifying and teaching gifted and talented students.

Star schools

For the star schools program, the Committee recommends $16,417,000. This is the same as the fiscal year 1991 appropriation, $16,417,000 more than the House allowance, and $6,417,000 more than the administration's request.

This program is designed to improve instruction in math, science, foreign languages, and other subjects such as vocational education, primarily by means of telecommunications technologies between centrally located instructors and students at schools in different locations, especially schools eligible for chapter 1 services or those in areas with scarce resources and limited access to such courses. The program supports eligible telecommunications partnerships organized on a statewide or multistate basis to develop, construct, and acquire telecommunications equipment; to develop and acquire instructional programming; and to obtain technical assistance in such areas. At least 50 percent of the funds must be for services in chapter 1 eligible schools, and at least 25 percent of the funds must be for instructional programming. Generally, grantees must provide a 25-percent match in funds.

Of the amount provided, the Committee has included $4,000,000 to establish a statewide, publicly owned or controlled two-way interactive fiber optic telecommunications network, carrying voice, video, and data transmissions. This network should link public school systems, community colleges, and public and private colleges and universities, and should be used to demonstrate the capacity of fiber optic telecommunications to improve the academic performance of students in both rural and urban areas. The Committee intends, by calling for a statewide network, that the fiber optic telecommunications network have at least one point of presence in every county, plus a point of presence in every community college, and in every public and private college or university.

Educational partnerships

The Committee recommends $4,233,000 for the educational partnerships program as authorized by section 6041 of the Omnibus Trade and Competitiveness Act of 1988. This is the same as the fiscal year 1991 appropriation, the administration's request and the House allowance. About five new projects will be supported at this level.

This program supports competitive grants to support the creation of alliances between the private sector and public elementary and secondary schools or institutions of higher education. Such alliances will be designed to encourage excellence in education and enrich the career awareness of students. Grants may cover up to 90 percent of the cost of such projects in the first award year and decline to not more than 33⅓ percent in the fourth and final award year. The Secretary must conduct an annual evaluation of grants awarded under this program.

Territorial teacher training

For territorial teacher training, the Committee recommends $1,769,000. This is the same as the fiscal year 1991 appropriation, the administration's request and the House allowance.

Funds are awarded to the departments of education in American Samoa, Guam, the Northern Mariana Islands, the Republic of Palau, and the Virgin Islands to train elementary and secondary school teachers. Funds also may be used to provide technical assistance to, and coordination among, the teacher training programs in the territories. These training efforts have been important in assisting the outlying areas to upgrade the qualifications of their uncertified instructional staff and to assist teachers to obtain college degrees.

Leadership in educational administration

The Committee recommends $370,000 for the leadership in educational administration [LEAD] program. This amount is the same as the administration's request and the House allowance. It is $3,461,000 less than the fiscal year 1991 comparable appropriation. The amount provided will fund only the continuation awards necessary to close out this program, and thus complete the funding of all grants for the legislatively mandated 6-year period.

LEAD supports one institute per State through which state or local education agencies, higher education institutions, private nonprofit organizations or consortia of such entities can train school administrators in the management and problem-solving skills they need to meet the challenges of educational reform and improve the quality of education at the school and program level.

Midcareer teacher training

The Committee recommends $987,000 for midcareer teacher training grants, the same as the fiscal year 1991 appropriation. The administration and the House requested no funding for this program.

This program provides grants to institutions of higher education with schools of education to establish and maintain programs to provide teacher training to individuals who have college degrees and job experience in fields related to education and wish to become teachers.

National Board for Professional Teaching Standards

The Committee recommends $4,880,000 for the National Board for Professional Teaching Standards, the same as the fiscal year 1991 appropriation and the House allowance. The administration did not request funds for this program.

The 1991 Supplemental Appropriations Act allowed expenditure of the 1991 amount which was appropriated for the Board pending enactment of authorizing language. The supplemental provided that these funds should be based on the authorization which passed the House on October 26, 1990. The 1992 bill provides funding under the same terms, conditions and limitations. The Board matches these funds on a 1-to-1 basis for development of assessment instruments and procedures to support its effort to create voluntary, national certification standards for teachers.

LIBRARIES

Appropriations, 1991	$142,898,000
Budget estimate, 1992	35,000,000
House allowance	142,747,000
Committee recommendation	149,747,000

The Committee recommends an appropriation of $149,747,000 for libraries in fiscal year 1992, which is $6,849,000 more than the fiscal year 1991 comparable appropriation, $114,747,000 more than the administration's request, and $7,000,000 more than the House allowance.

Federal library funds provide grants to States to improve and extend library services. The Federal appropriation also supports resource sharing efforts among libraries, programs for personnel training, support for research libraries, and adult literacy programs in public libraries.

Public library services

The Committee has provided $83,898,000 for libraries in fiscal year 1992, which is the same as the fiscal year 1991 appropriation and the House allowance, and $48,898,000 more than the administration's request. States receive population-based formula grants to assist in extending and improving public library services. Grants are also used to make library services more accessible to persons who, because of barriers such as age, residence, or physical disability, have had limited or no access to library services. State and local matching requirements range from 33 to 66 percent of total project costs.

Public library construction

The Committee recommends $19,218,000 for public library construction, the same amount appropriated in fiscal year 1991 and $5,000,000 more than the House allowance. The administration requested no funding for public library construction.

Under this program, States receive formula grants based on population for public library construction, for modification of existing library facilities, and equipment for providing access to library resources. Projects to remove architectural barriers and to reduce energy consumption are also permitted. State and local matching requirements range from 50 to 66 percent.

Interlibrary cooperation

The Committee recommends $19,908,000 for interlibrary cooperation, which is the same as the fiscal year 1991 appropriation and the House allowance. The administration requested no funding for interlibrary cooperation.

States receive formula grants based on population to stimulate interlibrary cooperation and resource sharing among all types of libraries: school, academic, public, and other special libraries. Grants fund projects such as linking libraries to data bases through telecommunications systems, resource sharing projects not linked to automation, training of library personnel to handle recent technological advances, and preserving endangered library resources. The Committee believes that interlibrary cooperation is a cost-effective way to meet libraries' acquisition needs and may, in the long run, reduce the need for Federal support of public library services.

Training

The Committee is providing $5,000,000 for library career training programs, $4,349,000 more than the fiscal year 1991 appropriation and the same as the House allowance. The administration requested no funding for this activity. The library training program is authorized under title II, part B, of the Higher Education Act. It supports grants to institutions of higher education and library organizations to train or retrain individuals for service in all types of libraries.

Research and demonstrations

The Committee is providing $325,000 for library research and demonstrations, the same as the 1991 amount and the House allowance. The administration did not request funds for this program. Research and demonstration activities are authorized under part B of title II of the Higher Education Act. This program provides discretionary grants and contracts to support projects to improve libraries and information technologies, and to disseminate the results of these projects. Approximately 7 library research and demonstration projects will be funded in 1991.

Research libraries

The Committee recommends an appropriation of $5,855,000 for research libraries, which is the same as the fiscal year 1991 appropriation and the House allowance. The administration requested no funding for research libraries. Grants are awarded to assist major research libraries, both public and private, in maintaining, preserving, and strengthening their collections. Funds may be used to acquire research materials, preserve collections, increase access to research materials, and promote interinstitutional activities.

Library literacy programs

The Committee recommends an appropriation of $8,163,000 for library literacy programs, which is the same as the fiscal year 1991 appropriation and the House allowance. The administration requested no funding for library literacy programs.

Under this program, grants are awarded to State library administrative agencies and local public libraries to promote adult literacy training in public libraries.

College library technology

The Committee recommends an appropriation of $6,404,000 for college library technology and cooperation grants, which is $2,500,000 more than the fiscal year 1991 appropriation and the House allowance. The administration requested no funding for college library technology. Discretionary grants are awarded to institutions of higher education for: equipment necessary to participate in networks for sharing of library resources; assistance in establishing and strengthening joint use library facilities; and research and demonstration projects in using technology. Institutions must match 33 percent of their grants with non-title II funds.

The Committee recognizes the difficulties research and education institutions have in compiling and accessing biotechnology related information. The Committee has provided an additional $2,500,000 to fund a Biotechnology Information Education Demonstration Project. This demonstration project would adapt the Integrated Academic Information Management Systems [IAIMS] model to the area of biotechnology. The Committee believes that the Robert Parks Library in Ames, IA, is ideally suited for receipt of these funds.

Foreign language materials

The Committee recommends $976,000 for foreign language materials, which is the same as the fiscal year 1991 appropriation and $500,000 less than the House allowance. The administration did not request funding for this activity. Under this program, competitive grants are made to State and local public libraries to assist them in acquiring foreign language materials.

DEPARTMENTAL MANAGEMENT

PROGRAM ADMINISTRATION

Appropriations, 1991 comparable	$284,008,000
Budget estimate, 1992	306,867,000
House allowance	301,952,000
Committee recommendation	284,008,000

The Committee recommends an appropriation of $284,008,000 for program administration. This is the same as the fiscal year 1991 appropriation and $19,559,000 less than the administration's request.

Funds support personnel compensation and benefits, travel, rent, communications, utilities, printing, equipment and supplies, automated data processing, and other services required to award, administer, and monitor an estimated 220 Federal education programs. Support for program evaluation and studies and advisory councils is also provided under this activity. The Credit Reform Act of 1990 requires that costs for Federal administration of credit programs, including guaranteed student loans, be displayed within the program account to give a better idea of the full costs of the program. Therefore, funds for administering guaranteed student loans, which were included in the program administration account in previous years, are provided in the "Guaranteed student loans program" account, as requested.

The Office of Special Education Programs [OSEP] oversees formula grants to States and territories. Under these grants, free and appropriate public education and related services are provided to children with disabilities. Generally, teams of OSEP staff monitor the programs, making onsite visits to State education agencies to determine whether States are in compliance with appropriate regulations. The Assistant Secretary set the goal of one visit to each State every 3 years for OSEP staff. Currently, according to a recent report prepared by the General Accounting Office, monitoring visits to each State take place about every 5 to 6 years. In order to increase the frequency of onsite visits, the Committee directs the Department to provide nine additional FTE's to the OSEP monitoring staff, whose responsibility it is to monitor State formula grants under the Individuals with Disabilities Education Act, part B.

Community, junior and technical colleges enroll more than 6 million students annually in accredited programs and another 4 million additional students in noncredit, continuing education courses. While these institutions now serve the largest sector of the higher education community, they lack representation in the ranks of professional and executive management positions within the Department of Education. Until the authorizing legislation for an Assistant Secretary for Community Colleges is enacted, the Committee directs the Department to designate a high-level senior official to be the liaison for community colleges. This official should have expertise in the community colleges field; serve as the principal advisor to the Secretary on matters affecting community and junior colleges, and technical schools; and work with the Federal Interagency Committee on Education to improve coordination of the outreach programs in the numerous departments and agencies which administer education and job training programs and collaborative business education partnerships. The designee should continue to act in that capacity until the position of Assistant Secretary for Community Colleges has been established.

OFFICE FOR CIVIL RIGHTS

Appropriations, 1991	$48,405,000
Budget estimate, 1992	56,000,000
House allowance	56,000,000
Committee recommendation	51,691,000

The Committee recommends an appropriation of $51,691,000 for the Office for Civil Rights [OCR]. This is $3,286,000 more than the fiscal year 1991 appropriation, and $4,309,000 less than the administration's request and the House allowance.

The Office for Civil Rights is responsible for the enforcement of laws that prohibit discrimination on the basis of race, color, national origin, sex, disability, and age in all programs and institutions funded by the Department of Education. To carry out this responsibility, OCR investigates and resolves discrimination complaints; monitors desegregation and equal educational opportunity plans; reviews possible discriminatory practices by recipients of Federal education funds; and provides technical assistance to funding recipients to help them meet civil rights requirements.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 1991	$24,837,000
Budget estimate, 1992	28,521,000
House allowance	26,932,000
Committee recommendation	26,530,000

The Committee recommends an appropriation of $26,530,000 for the Office of the Inspector General. This is $1,693,000 more than the fiscal year 1991 appropriation, $1,991,000 less than the administration's request, and $402,000 less than the House allowance.

The Office of the Inspector General has the authority to investigate all departmental programs and administrative activities, including those under contract or grant, to prevent and detect fraud and abuse, and to ensure the quality and integrity of those programs. The Office is responsible for the audit, investigative, and security functions of the Department.

The Committee understands that the first priority of the Office of the Inspector General will be to identify and investigate fraud and abuse by recipients of the Department's funds. The Committee agrees with the Office's intention to concentrate a majority of its audit and investigative staff time to identifying causes of systemic fraud and abuse in the postsecondary student aid programs, formulating potential solutions, and auditing and investigating those alleged to be misusing these programs. Resources provided will also enable the Office to continue to provide audit coverage for the Department's contracts, financial accounting and ADP systems, and programs that award large grants; and to audit the Department's financial statements.

TITLE IV—RELATED AGENCIES

ACTION

OPERATING EXPENSES

Appropriations, 1991	$191,292,000
Budget estimate, 1992	198,552,000
House allowance	193,678,000
Committee recommendation	201,691,000

The Committee recommends an appropriation of $201,691,000 for ACTION. The amount recommended is $10,399,000 more than the fiscal year 1991 appropriation, $3,139,000 more than the administration request, and $8,013,000 more than the House allowance.

VISTA

The Committee provides $34,683,000 for the Volunteers in Service to America [VISTA] Program. This is $4,396,000 more than the fiscal year 1991 appropriation, $1,120,000 less than the administration request, and $1,990,000 more than the House allowance.

This funding level will support 3,100 service-years. This is 178 service-years more than fiscal year 1991. Increased funds will also be used to provide a 7.7-percent increase in the subsistence allowance for each VISTA volunteer, as well as to cover increased health benefits costs for volunteers.

As noted in previous years, the Committee expects ACTION to continue to recruit, train, and place volunteers throughout the fiscal year, and stresses the importance of aggressively recruiting recent college graduates as VISTA volunteers. The Committee expects ACTION to develop a computerized system of tracking recruitment data.

The Committee directs ACTION to continue its efforts to publicize the student loan deferment opportunities available to VISTA volunteers authorized under sections 428(b)(1)(M) and 464(c)(2)(A) of the Higher Education Act of 1965, as amended.

VISTA Literacy Corps

The Committee includes $4,930,000 for the VISTA Literacy Corps. The Committee recommendation is $309,000 more than the fiscal year 1991 appropriation, the same as the administration request, and $309,000 more than the House allowance.

This level of funding is intended to support 440 service-years, the same as the fiscal year 1991 level. As in the case of the regular VISTA Program, increased funds will be used to provide a 7.7-percent increase in the subsistence allowance for the volunteers in the VISTA Literacy Corps.

Student community service

The Committee recommends an appropriation of $976,000 for the Student Community Service Program, which is the same amount as the fiscal year 1991 appropriation, the administration request, and the House allowance. This program provides training and technical assistance for high school, college, and community agency staff who develop and manage student volunteer programs. The amount provided by the Committee will support approximately 58 projects in fiscal year 1992.

ACTION drug alliance

The Committee provides $1,451,000 for the ACTION drug alliance, which is the same as the administration request, $740,000 less than the fiscal year 1991 appropriation, and $451,000 more than the House allowance. This amount will support the award of 52 grants.

As in 1991, the Committee intends that these funds continue to be used to mobilize and initiate private sector efforts to increase voluntarism in preventing drug abuse through public awareness and education.

Older American volunteer programs

The Committee provides $127,809,000 for the older American volunteer programs, which is $3,869,000 more than the administration request, the House allowance, and the fiscal year 1991 appropriation. Of the total increase provided for the older American volunteer programs, one-third will be available for national significance grants.

The Committee instructs ACTION to apply any unobligated funds from previous years' unexpended balances to grant adjustments in accordance with section 226 of the Domestic Volunteer Service Amendments of 1989, Public Law 101-204, to national significance grants under section 225, or to provide second year funding for stipend increases for non-ACTION-supported volunteers to select projects.

Last year, the Committee provided a stipend increase for volunteers under the foster grandparent and senior companion programs. So that all volunteers could benefit, the Committee provided the increase for non-ACTION-supported volunteers in addition to ACTION-supported volunteers. While it is our continued expectation that projects pick up the cost of stipend increases for non-ACTION-supported volunteers during the second year of the increase, there may be extreme circumstances where projects are unable to provide the necessary funds. In these instances, ACTION may opt to provide additional funds for a portion of the second year, using unobligated funds from previous year's unexpended balances.

Foster grandparents

The Committee recommendation includes $65,590,000 for the Foster Grandparents Program, which is $2,644,000 more than the fiscal year 1991 appropriation, the administration request, and the House allowance. This program enables low-income senior citizens to provide supportive, person-to-person services to children and young people experiencing problems with abuse and neglect, drug abuse, illiteracy, juvenile delinquency, teenage pregnancy, or who have physical and mental disabilities. Volunteers serve 20 hours a week providing care and attention on a one-to-one basis to needy children. The funding level provided includes $2,180,000 to cover stipend increases of 10 cents per hour, raising the stipend from $2.35 to $2.45 per hour, as authorized in the Domestic Volunteer Service Amendments of 1989, Public Law 101–204. As in the case when the stipend was increased in fiscal year 1991, the funding level provided includes increases for both ACTION-supported and non-ACTION-supported volunteers, so that all volunteers may benefit by this increase. As in the past, the Committee expects that project sponsors will provide the stipend increase for non-ACTION volunteers in subsequent years. In addition, $307,000 is provided for cost-of-living adjustments for existing projects, and $153,000 is provided for national significance grants. National significance grants can include work with boarder babies, respite care for families of chronically ill children, and child care programs for children with special needs.

Senior Companion Program

For the Senior Companion Program, the Committee has provided $28,727,000, which is $1,158,000 more than the fiscal year 1991 appropriation, the administration request, and the House allowance. This program enables low-income senior citizens to provide personal assistance and companionship primarily to adults, particularly the frail, home-bound elderly. Volunteer assignments include work in acute care hospitals, home health agencies, senior centers, hospices, and community mental health centers. Of the amount provided, $1,080,000 is available to cover stipend increases for both ACTION-supported volunteers and non-ACTION-supported volunteers, from $2.35 to $2.45 per hour, so that all volunteers may benefit by this increase. As in the past, the Committee expects that project sponsors will provide the stipend increase for non-ACTION volunteers in subsequent years. The sum of $52,000 is provided for cost-of-living increases and $26,000 for national significance grants. The national significance grants will allow existing projects to develop new volunteer components in such areas as respite care for frail elderly, and care for developmentally disabled adults who reside at home and in community-based settings, including, where appropriate, the involvement of older developmentally disabled volunteers.

Retired Senior Volunteer Program

The Committee recommendation also provides $34,830,000 for the Retired Senior Volunteer Program [RSVP], which is $1,405,000 more than the fiscal year 1991 appropriation, the administration request, and the House allowance. This program provides persons age 60 and over with the opportunity for volunteer service in their own community. Volunteers participate in youth counseling, literacy enhancement, crime prevention, the delivery of health care services, and other activities. The Committee expects that $935,000 of the increase will be used to provide a cost-of-living adjustment to existing grantees, and $470,000 will be used for national significance grants. These grants could include, among others, those enumerated under the Senior Companion Program and the Foster Grandparent Program.

Inspector general

The Committee provides $976,000 for the ACTION inspector general, $41,000 less than the administration request, the same as the fiscal year 1991 amount, and $56,000 more than the House allowance. The OIG reviews overall agency operations, primarily through audits and investigations, with the goal of increasing organizational efficiency and effectiveness, as well as preventing fraud, waste, and abuse. The amount provided will support a newly automated office, eliminating the need for additional FTE's, which will remain at 12. Funds will also be used to provide inflationary increases.

Program support

The Committee provides $29,528,000 for program support, $30,000 less than the administration request, $2,104,000 more than the comparable fiscal year 1991 appropriation, and the same as the House allowance.

CORPORATION FOR PUBLIC BROADCASTING

Appropriations, 1993	$318,636,000
Budget estimate, 1994	260,000,000
House allowance	253,309,000
Committee recommendation	284,000,000

The Committee recommends an appropriation of $284,000,000 for the Corporation for Public Broadcasting. These funds are an advance appropriation for fiscal year 1994. This amount is $24,000,000 more than the administration request and $30,691,000 more than the House allowance. Due to fulfillment last year of Congress' commitment to provide one-time funding for costs associated with the Corporation's satellite replacement, this amount is $34,636,000 less than the fiscal year 1993 appropriation.

Programming and system support

The Committee has provided $284,000,000 for the Corporation's programming and system support activities. This is $30,691,000 more than the fiscal year 1992 comparable appropriation, and $24,000,000 more than the President's request and the House allowance.

Funds provided to the Corporation for programming and system support are distributed to the Nation's public television and radio stations in the form of community service grants. Funds are also used by the Corporation for the development of new programming for national distribution. Amounts allocated to each activity are determined by formula as stipulated in the Corporation's enacting statute.

Of the amount provided, the Committee expects the Corporation to provide to the Independent Television Service [ITVS] adequate operational funding in addition to $6,000,000 for production costs.

Satellite interconnection fund

The Committee is providing no additional funds for the public broadcasting satellite interconnection fund. Congress authorized $200,000,000 for the replacement, refurbishment, upgrading, and maintenance of the public television and radio satellite interconnection system. A total of $198,400,000 was appropriated for this purpose.

FEDERAL MEDIATION AND CONCILIATION SERVICE

Appropriations, 1991	$27,037,000
Budget estimate, 1992	28,145,000
House allowance	28,118,000
Committee recommendation	29,118,000

The Committee recommends an appropriation of $29,118,000 for the Federal Mediation and Conciliation Service. This is $2,081,000 over the fiscal year 1991 appropriation, $973,000 more than the budget request, and $1,000,000 more than the House allowance.

The Federal Mediation and Conciliation Service prevents and minimizes work stoppages by making available skilled professional mediators. Activities include education and training to support free collective bargaining, technical assistance to promote development of sound labor-management relationships and practices, and provision of a roster of qualified arbitrators to assist the parties to a collective-bargaining agreement in the resolution of grievances. The Committee has provided $1,300,000 for the Labor-Management Cooperative Grant Program. This funding will allow for continuation of meritorious grants and three FTE's and administrative costs for the program.

FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

Appropriations, 1991	$4,189,000
Budget estimate, 1992	4,719,000
House allowance	4,357,000
Committee recommendation	4,357,000

The Committee recommends an appropriation of $4,357,000 for the Federal Mine Safety and Health Review Commission, an increase of $168,000 over the fiscal year 1991 appropriation, $362,000 less than the administration request, and the same as the House allowance.

The Commission adjudicates disputes between the Labor Department's Mine Safety and Health Administration and employers or employees to whom MSHA has issued a citation charging a violation.

The Committee expects that the Mine Safety Commission will conduct its activities in strict compliance with the Government in the Sunshine Act. The Commission will close its meetings and/or hearings to the public only when absolutely necessary and in accordance with the statutory exceptions stipulated in the Sunshine Act.

NATIONAL COMMISSION ON ACQUIRED IMMUNE DEFICIENCY SYNDROME

Appropriations, 1991	$2,928,000
Budget estimate, 1992	3,000,000
House allowance	2,000,000
Committee recommendation	3,000,000

The Committee recommends an appropriation of $3,000,000 for the National Commission on Acquired Immune Deficiency Syndrome. This is the same as the administration request, $72,000 above the fiscal year 1991 amount, and $1,000,000 over the House allowance.

The Commission was created by Public Law 100-607 to continue to monitor and make policy recommendations regarding our Nation's handling of the HIV epidemic.

NATIONAL COMMISSION ON CHILDREN

Appropriations, 1991	$1,073,000
Budget estimate, 1992	....
House allowance	....
Committee recommendation	750,000

The Committee has provided $750,000 for the National Commission on Children. The Commission was established to serve as a forum on behalf of the children of the Nation. This funding will enable the Commission to continue its activities.

NATIONAL COMMISSION ON LIBRARIES AND INFORMATION SCIENCE

Appropriations, 1991	$732,000
Budget estimate, 1992	911,000
House allowance	750,000
Committee recommendation	911,000

The Committee recommends an appropriation of $911,000 for the National Commission on Libraries and Information Science, which is the full authorized amount. It is $179,000 more than the fiscal year 1991 appropriation, the same as the administration request, and $161,000 more than the House allowance.

This Commission has responsibility for advising the President and Congress on the development and implementation of national policy in the library and information field, developing overall plans for meeting national library and information needs, and coordinating activities at the Federal, State, and local levels in meeting those needs.

NATIONAL COMMISSION TO PREVENT INFANT MORTALITY

Appropriations, 1991	$390,000
Budget estimate, 1992	....
House allowance	390,000
Committee recommendation	440,000

The Committee recommends an appropriation of $440,000 for the National Commission to Prevent Infant Mortality. This is $50,000 above the House allowance and the fiscal year 1991 appropriation. There was no administration request for this Commission in fiscal year 1991.

The National Commission to Prevent Infant Mortality was created by Public Law 99–660 to report to Congress and the President on the resources that affect infant mortality and to recommend national policy actions for preventing infant mortality.

NATIONAL COUNCIL ON DISABILITY

Appropriations, 1991	$1,439,000
Budget estimate, 1992	1,642,000
House allowance	1,497,000
Committee recommendation	1,642,000

The Committee recommends $1,642,000 for the National Council on Disability. This is $203,000 more than the fiscal year 1991 appropriation, the same as the administration request, and $145,000 more than the House allowance.

The National Council on Disability was created to establish general policies regarding Federal activities affecting persons with disabilities and to review rehabilitation services and disability research.

The increase provided by the Committee is intended, among other things, to enable the Council to provide technical assistance to businesses and other entities regarding the implementation of the Americans With Disabilities Act (Public Law 101–336).

NATIONAL LABOR RELATIONS BOARD

Appropriations, 1991	$147,461,000
Budget estimate, 1992	162,000,000
House allowance	162,000,000
Committee recommendation	162,000,000

The Committee recommends an appropriation of $162,000,000 for the National Labor Relations Board. This is the same as the administration request and the House allowance and $14,539,000 more than the fiscal year 1991 funding level.

The Board executes its responsibilities under the National Labor Relations Act by resolving representation disputes in industry and preventing unfair labor practices on the part of labor unions and/or employers.

The Committee expects that the Board will conduct its activities in strict compliance with the Government in the Sunshine Act. The Board will close its meetings and/or hearings to the public only when absolutely necessary and in accordance with the statutory exceptions stipulated in the Sunshine Act.

NATIONAL MEDIATION BOARD

Appropriations, 1991	$6,514,000
Budget estimate, 1992	7,008,000
House allowance	6,775,000
Committee recommendation	6,775,000

The Committee recommends an appropriation of $6,775,000 for the National Mediation Board. This is $$261,000 above the fiscal year 1991 appropriation, $233,000 less than the administration request, and the same as the House allowance.

The National Mediation Board handles labor-management disputes and questions of representation in the railroad and airline industries.

OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION

Appropriations, 1991	$6,247,000
Budget estimate, 1992	6,711,000
House allowance	6,497,000
Committee recommendation	6,497,000

The Committee recommends an appropriation of $6,497,000 for the Occupational Safety and Health Review Commission. This is $250,000 more than the fiscal year 1991 appropriation, $214,000 less than the administration request, and the same as the House allowance.

The Review Commission is charged with ruling on cases forwarded to it by the Department of Labor when disagreements arise over the results of safety and health inspections performed by the Occupational Safety and Health Administration [OSHA]. Employers have the right to dispute any alleged job safety or health violation found during the inspection by OSHA, the penalties proposed by OSHA, and time given by OSHA to correct any hazardous situation. Employees and representatives of employees may initiate a case by challenging the propriety of the time OSHA has allowed for correction of any violative condition.

PHYSICIAN PAYMENT REVIEW COMMISSION

Appropriations, 1991	$3,778,000
Budget estimate, 1992	4,495,000
House allowance	4,300,000
Committee recommendation	4,495,000

The Committee recommends the transfer of $4,495,000 from the Medicare trust funds to support operations of the Physician Payment Review Commission [PPRC]. This is the same as the independent commission's request to the Congress, $195,000 over the House amount, and $717,000 over the fiscal year 1991 amount.

The Physician Payment Review Commission was established by the Consolidated Omnibus Reconciliation Act of 1985 (Public Law 99-272). The Commission makes recommendations to the Secretary of Health and Human Services and the Congress regarding Medicare payments for physician services.

The Committee has provided the requested increase to allow PPRC to comply with mandates contained in the Omnibus Budget Reconciliation Act of 1990 [OBRA 90]. The Commission is required to study medical malpractice liability reform, graduate medical education, beneficiary access to care in rural and inner-city areas, utilization review and quality assurance, and constraining the costs to employers of health insurance plans.

The Committee is particularly interested in the interface between graduate medical education payments and funding for health professions education provided through the Health Resources and Services Administration. The Committee requests that PPRC address both methods of financing of health professions' education and how they might be better coordinated.

PROSPECTIVE PAYMENT ASSESSMENT COMMISSION

Appropriations, 1991	$3,875,000
Budget estimate, 1992	4,210,000
House allowance	4,030,000
Committee recommendation	4,030,000

The Committee recommends the transfer of $4,030,000 from the Medicare trust funds for the operation of the Prospective Payment Assessment Commission [ProPAC]. This is $180,000 below the independent commission's request to the Congress, the same as the House allowance, and $155,000 over the fiscal year 1991 amount.

ProPAC was established by the Social Security Amendments of 1983 (Public Law 98-21), which enacted the Medicare Prospective Payment System [PPS]. ProPAC advises the Secretary of Health and Human Services and the Congress, providing reports on the progress and impact of PPS, and recommendations on improving the system.

RAILROAD RETIREMENT BOARD

DUAL BENEFITS PAYMENTS ACCOUNT

Appropriations, 1991	$310,927,000
Budget estimate, 1992	297,000,000
House allowance	306,000,000
Committee recommendation	301,100,000

The Committee has provided a total of $301,100,000 for the "Dual benefits payments" account, including $18,000,000 in income tax receipts on dual benefits, as authorized by law. The total provided is $9,827,000 less than the fiscal year 1991 appropriation, $4,100,000 less than provided by the House and $4,100,000 more than the administration request.

The Committee has rejected the administration's proposal to fund 25 percent of vested dual benefit payments from the "Railroad retirement" account.

This appropriation provides for vested dual benefit payments authorized by the Railroad Retirement Act of 1974, as amended by the Omnibus Reconciliation Act of 1981. This separate account established for the payment of dual benefits is funded by general fund appropriations and income tax receipts on vested dual benefits.

FEDERAL PAYMENTS TO THE RAILROAD RETIREMENT ACCOUNT

Appropriations, 1991	$400,000
Budget estimate, 1992	400,000
House allowance	400,000
Committee recommendation	400,000

The Committee recommends $400,000 for interest earned on unnegotiated checks to remain available through September 30, 1992.

Beginning in fiscal year 1991, the Board will no longer receive credits directly for the principal amount of uncashed railroad retirement checks under provisions of the Competitive Equality Banking Act of 1987. Instead, such principal amounts will be appropriated to the Department of the Treasury for transfer to this account. Interest on uncashed checks, however, must still be appropriated in advance to this account as provided by section 417 of the Railroad Retirement Act of 1983 (Public Law 98-76).

LIMITATION ON ADMINISTRATION

Appropriations, 1991	$85,223,000
Budget estimate, 1992	91,300,000
House allowance	91,300,000
Committee recommendation	90,550,000

The Committee recommends an appropriation of $90,550,000 for administration of railroad retirement/survivor benefit programs, an increase of $5,327,000 over fiscal year 1991.

The General Services Administration shall participate in, conduct oversight of, and approve all aspects of the Railroad Retirement Board Mainframe Computer Replacement Program.

SPECIAL MANAGEMENT IMPROVEMENT FUNDING

Appropriations, 1991	....
Budget estimate, 1992	$13,910,000
House allowance	3,264,000
Committee recommendation	3,264,000

The Committee recommends $3,264,000 for the Special Management Improvement Fund, the same level as the House allowance, and $10,646,000 below the budget request.

The Special Management Improvement Fund has been established to implement a management improvement agreement between the Board and the Office of Management and Budget. In view of the fact that the Board has received staffing increases—this year, as well as steady increases over the last several years, over and above those recommended in the Management Improvement Fund—the Committee reserves judgment on funding the next 4 years of this initiative. It is expected that sufficient progress will be made in the administration of the Board's railroad retirement, unemployment and sickness benefits programs in fiscal year 1992 to warrant additional funding. Therefore, the Board is directed to provide the Committee with a report on the progress it is making on the implementation of this initiative no later than March 31, 1992.

LIMITATION ON REVIEW ACTIVITY

Appropriations, 1991	$5,855,000
Budget estimate, 1992	7,700,000
House allowance	6,089,000
Committee recommendation	6,700,000

The Committee recommends $6,700,000 for the Office of the Inspector General. This is $1,000,000 less than the administration request, $611,000 more than the House allowance, and $845,000 more than the fiscal year 1991 appropriation.

The Office of the Inspector General conducts audits, investigations, and review activities. This amount is to be derived from the railroad retirement and railroad unemployment insurance trust funds.

SOLDIERS' AND AIRMEN'S HOME

OPERATION AND MAINTENANCE

Appropriations, 1991	$40,581,000
Budget estimate, 1992	42,123,000
House allowance	40,581,000
Committee recommendation	42,123,000

The Committee recommends authority to expend $42,123,000 from the Soldiers' and Airmen's Home permanent fund. This is $1,542,000 over the House amount, the same as the administration request, and $1,542,000 more than the fiscal year 1991 appropriation.

The U.S. Soldiers' and Airmen's Home provides residence, subsistence, medical, and other care to eligible retired Army and Air Force veterans. The facility is funded from a trust fund on deposit with the U.S. Treasury. The trust fund receives income from members' fees, interest, withheld pay, and nonjudicial fines imposed on active duty soldiers and airmen. The home currently serves about 1,900 residents.

CAPITAL OUTLAY

Appropriations, 1991	$11,223,000
Budget estimate, 1992	4,220,000
House allowance	4,220,000
Committee recommendation	4,220,000

The Committee recommends authority to expend $4,220,000 from the Soldiers' and Airmen's Home permanent fund. This amount is the same as the administration request, the House allowance, and $7,003,000 less than the fiscal year 1991 appropriation.

U.S. INSTITUTE OF PEACE

Appropriations, 1991	$8,393,000
Budget estimate, 1992	8,911,000
House allowance	8,393,000
Committee recommendation	11,918,000

The Committee recommends an appropriation of $11,918,000 for the U.S. Institute of Peace. This is $3,525,000 more than the fiscal year 1991 appropriation, $3,007,000 more than the administration request, and $3,525,000 more than the House allowance. The amount provided by the Committee is the same amount requested by the Institute.

The Institute was established by the U.S. Institute of Peace Act (Public Law 98-525). The Institute is an independent, nonprofit, national organization that promotes scholarship and education in matters relating to peace and international conflict resolution. The Institute is governed by a 15-member Board of Directors and is located in Washington, DC.

The Committee has provided $1,675,000 for the Institute's new special program in Middle East peacemaking and conflict resolution, and $10,243,000 for basic programming.

U.S. NAVAL HOME

OPERATION AND MAINTENANCE

Appropriations, 1991	
Budget estimate, 1992	$10,055,000
House allowance	10,055,000
Committee recommendation	10,055,000

The Committee recommends authority to expend $10,055,000 from the Armed Forces Retirement Home trust fund. This is the same as the House amount and the administration request.

The U.S. Naval Home is currently part of the Navy. Starting in 1992, the home will be established as an independent Federal agency.

CAPITAL PROGRAM

Appropriations, 1991	
Budget estimate, 1992	$1,253,000
House allowance	1,253,000
Committee recommendation	1,253,000

The Committee recommends authority to expend $1,253,000 from the Armed Forces Retirement Home trust fund. This amount is the same as the House allowance and the administration request.

BUDGETARY IMPACT OF BILL

PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC. 308(a), PUBLIC LAW 93-344, AS AMENDED

[In millions of dollars]

	Budget authority		Outlays	
	Committee allocation	Amount of bill	Committee allocation	Amount of bill
Comparison of amounts in the bill with Committee allocations to its subcommittees of amounts in the First Concurrent Resolution for 1992: Subcommittee on Labor, Health and Human Services, Education, and Related Agencies:				
Defense				
International	12	12	12	[1] 12
Domestic	59,275	58,309	57,800	[1] 57,800
Mandatory	142,595	144,890	141,018	[1] 143,217
Projection of outlays associated with the recommendation:				
1992				[2] 146,805
1993				29,452
1994				6,119
1995				698
1996 and future years				32
Financial assistance to State and local governments for 1992 in bill	NA	94,259	NA	91,844

[1] Includes outlays from prior-year budget authority.

[2] Excludes outlays from prior-year budget authority.

NA: Not applicable.

COMPLIANCE WITH PARAGRAPH 7, RULE XVI, OF THE STANDING RULES OF THE SENATE

Paragraph 7 of rule XVI requires that Committee reports on general appropriations bills identify each Committee amendment to the House bill "which proposes an item of appropriation which is not made to carry out the provisions of an existing law, a treaty stipulation, or an act or resolution previously passed by the Senate during that session."

The following items are identified pursuant to this requirement:

Community service employment for older Americans, $400,000,000;
Targeted jobs tax credit, $20,000,000;
Health resources and services, $380,228,000;
Centers for Disease Control, $270,548,000;
National Institutes of Health, research training, $331,543,000;
Alcohol, drug abuse, and mental health, $1,855,687,000;
Disease prevention and health prevention, $5,000,000;
Energy emergency fund, $300,000,000;
Refugee and entrant assistance, $410,630,000;
Human development services, $1,003,550,000;
Educational research, statistics, and improvement, $4,880,000;
Corporation for Public Broadcasting, $284,000,000;
Soldiers' and Airman's Home, $46,343,000; and
United States Naval Home, $11,308,000.

COMPLIANCE WITH PARAGRAPH 12, RULE XXVI OF THE STANDING RULES OF THE SENATE

Paragraph 12 of rule XXVI requires that Committee reports on a bill or joint resolution repealing or amending any statute or part of any statute include "(a) the text of the statute or part thereof which is proposed to be repealed; and (b) a comparative print of that part of the bill or joint resolution making the amendment and of the statute or part thereof proposed to be amended, showing by stricken-through type and italics, parallel columns, or other appropriate typographical devices the omissions and insertions which would be made by the bill or joint resolution if enacted in the form recommended by the committee."

No items are identified pursuant to this requirement.

DEFINITION OF PROGRAM, PROJECT, AND ACTIVITY

During fiscal year 1992 for purposes of the Balanced Budget and Emergency Deficit Control Act of 1985 (Public Law 99-177), as amended, the following information provides the definition of the term "program, project, and activity" for departments and agencies under the jurisdiction of the Labor, Health and Human Services, and Education and Related Agencies Subcommittee. The term "program, project, and activity" shall include the most specific level of budget items identified in the Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act 1992, the accompanying House and Senate

Committee reports, the conference report and accompanying joint explanatory statement of the managers of the committee of conference and the tables inserted in the Congressional Record on the days when the bill or conference report is considered in the House.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
TITLE I -- DEPARTMENT OF LABOR							
EMPLOYMENT AND TRAINING ADMINISTRATION							
PROGRAM ADMINISTRATION							
Job training programs	19,884,000	21,528,000	21,528,000	21,528,000	+1,644,000	---	---
Trust funds	(2,118,000)	(2,179,000)	(2,179,000)	(2,179,000)	(+61,000)	---	---
Employment security	316,000	442,000	442,000	442,000	+126,000	---	---
Trust funds	(12,611,000)	(13,472,000)	(13,472,000)	(13,472,000)	(+861,000)	---	---
Financial and administrative management	13,343,000	14,502,000	14,502,000	14,502,000	+1,159,000	---	---
Trust funds	(10,075,000)	(10,686,000)	(10,686,000)	(10,686,000)	(+611,000)	---	---
Executive direction and administration	4,376,000	5,031,000	5,031,000	4,376,000	---	-655,000	-655,000
Trust funds	(3,870,000)	(4,047,000)	(4,047,000)	(3,870,000)	---	(-177,000)	(-177,000)
Regional operations	15,215,000	16,132,000	16,132,000	16,132,000	+917,000	---	---
Trust funds	(24,319,000)	(26,745,000)	(26,745,000)	(26,745,000)	(+2,426,000)	---	---
Apprenticeship services	16,051,000	16,553,000	16,553,000	17,000,000	+949,000	+447,000	+447,000
Total, Program Administration	122,178,000	131,317,000	131,317,000	130,932,000	+8,754,000	-385,000	-385,000
Federal funds	69,185,000	74,188,000	74,188,000	73,980,000	+4,795,000	-208,000	-208,000
Trust funds	(52,993,000)	(57,129,000)	(57,129,000)	(56,952,000)	(+3,959,000)	(-177,000)	(-177,000)

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
TRAINING AND EMPLOYMENT SERVICES							
Grants to States:							
Block grant	1,778,484,000	1,778,484,000	1,773,484,000	1,773,484,000	-5,000,000	-5,000,000	---
Summer youth employment and training program	682,912,000	682,912,000	682,912,000	682,912,000	---	---	---
Dislocated worker assistance	526,986,000	526,986,000	576,986,000	576,986,000	+50,000,000	+50,000,000	---
Federally administered programs:							
Native Americans	59,625,000	58,690,000	59,625,000	64,000,000	+4,375,000	+5,310,000	+4,375,000
Migrants and seasonal farmworkers	70,288,000	56,911,000	75,288,000	80,000,000	+9,712,000	+23,089,000	+4,712,000
Job Corps:							
Operations	800,238,000	837,033,000	846,033,000	847,033,000	+46,795,000	+10,000,000	+1,000,000
Construction and renovation	67,259,000	50,464,000	52,464,000	80,464,000	+13,205,000	+30,000,000	+28,000,000
Subtotal, Job Corps	867,497,000	887,497,000	898,497,000	927,497,000	+60,000,000	+40,000,000	+29,000,000
Veterans' employment	9,120,000	8,792,000	9,120,000	9,120,000	---	+328,000	---
National activities:							
Pilots and demonstrations	36,216,000	27,753,000	27,753,000	38,753,000	+2,537,000	+11,000,000	+11,000,000
Research, demonstration and evaluation	12,927,000	10,000,000	10,000,000	11,927,000	-1,000,000	+1,927,000	+1,927,000
Other	22,673,000	13,706,000	16,706,000	25,606,000	+2,933,000	+11,900,000	+8,900,000
Subtotal, National activities	71,816,000	51,459,000	54,459,000	76,286,000	+4,470,000	+24,827,000	+21,827,000
Subtotal, Federal activities	1,078,346,000	1,063,349,000	1,096,989,000	1,156,903,000	+78,557,000	+93,554,000	+59,914,000
Total, Job Training Partnership Act	4,066,728,000	4,051,731,000	4,130,371,000	4,190,285,000	+123,557,000	+138,554,000	+59,914,000
Job training for the homeless	11,223,000	---	7,400,000	11,223,000	---	+11,223,000	+3,823,000
Total, Training and Employment Services	4,077,951,000	4,051,731,000	4,137,771,000	4,201,508,000	+123,557,000	+149,777,000	+63,737,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS							
National contracts	304,481,000	267,395,000	304,481,000	312,000,000	+7,519,000	+44,605,000	+7,519,000
State grants	85,879,000	75,419,000	85,879,000	88,000,000	+2,121,000	+12,581,000	+2,121,000
Total	390,360,000	342,814,000	390,360,000	400,000,000	+9,640,000	+57,186,000	+9,640,000
FEDERAL UNEMPLOYMENT AND ALLOWANCES							
Trade adjustment	269,000,000	226,000,000	226,000,000	226,000,000	-43,000,000	---	---
Other activities	500,000	250,000	250,000	250,000	-250,000	---	---
Total	269,500,000	226,250,000	226,250,000	226,250,000	-43,250,000	---	---
STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS							
Unemployment Compensation (Trust Funds):							
State Operations	(1,458,435,000)	(1,510,973,000)	(1,510,973,000)	(1,510,973,000)	(+52,538,000)	---	---
State integrity activities	(278,249,000)	(304,723,000)	(304,723,000)	(304,723,000)	(+26,474,000)	---	---
National Activities	(6,213,000)	(6,486,000)	(6,486,000)	(6,486,000)	(+273,000)	---	---
Contingency	(391,544,000)	(440,703,000)	(440,703,000)	(440,703,000)	(+49,159,000)	---	---
Subtotal, Unemployment Compensation(trust funds)	(2,134,441,000)	(2,262,885,000)	(2,262,885,000)	(2,262,885,000)	(+128,444,000)	---	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Employment Service:							
Allotments to States:							
Federal funds	21,177,000	22,500,000	21,177,000	22,500,000	+1,323,000	---	+1,323,000
Trust funds	(783,940,000)	(727,500,000)	(783,940,000)	(815,600,000)	(+31,660,000)	(+88,100,000)	(+31,660,000)
Subtotal	805,117,000	750,000,000	805,117,000	838,100,000	+32,983,000	+88,100,000	+32,983,000
National Activities:							
Federal funds	3,806,000	2,200,000	2,200,000	2,200,000	-1,606,000	---	---
Trust funds	(56,114,000)	(72,500,000)	(85,000,000)	(80,000,000)	(+23,886,000)	(+7,500,000)	(-5,000,000)
Targeted jobs tax credit	(19,518,000)	(20,000,000)	(20,000,000)	(20,000,000)	(+482,000)	---	---
Subtotal, Employment Service	884,555,000	844,700,000	912,317,000	940,300,000	+55,745,000	+95,600,000	+27,983,000
Federal funds	24,983,000	24,700,000	23,377,000	24,700,000	-283,000	---	+1,323,000
Trust funds	(859,572,000)	(820,000,000)	(888,940,000)	(915,600,000)	(+56,028,000)	(+95,600,000)	(+26,660,000)
Total, State Unemployment	3,018,996,000	3,107,585,000	3,175,202,000	3,203,185,000	+184,189,000	+95,600,000	+27,983,000
Federal Funds	24,983,000	24,700,000	23,377,000	24,700,000	-283,000	---	+1,323,000
Trust Funds	(2,994,013,000)	(3,082,885,000)	(3,151,825,000)	(3,178,485,000)	(+184,472,000)	(+95,600,000)	(+26,660,000)
ADVANCES TO UNEMPLOYMENT TRUST FUND AND OTHER FUNDS	328,000,000	236,990,000	236,990,000	236,990,000	-91,010,000	---	---
Total, Employment & Training Administration	8,206,985,000	8,096,687,000	8,297,890,000	8,398,865,000	+191,880,000	+302,178,000	+100,975,000
Federal funds	5,159,979,000	4,956,673,000	5,088,936,000	5,163,428,000	+3,449,000	+206,755,000	+74,492,000
Trust funds	(3,047,006,000)	(3,140,014,000)	(3,208,954,000)	(3,235,437,000)	(+188,431,000)	(+95,423,000)	(+26,483,000)

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
LABOR - MANAGEMENT SERVICES							
SALARIES AND EXPENSES							
Labor-management relations service	5,733,000	5,526,000	5,526,000	5,526,000	-207,000		
Labor-management standards enforcement	25,238,000	26,530,000	26,530,000	26,530,000	+1,292,000	---	---
Pension and welfare benefit programs	56,405,000	63,784,000	63,784,000	62,784,000	+6,379,000	---	---
						-1,000,000	-1,000,000
Total, LMSA	87,376,000	95,840,000	95,840,000	94,840,000	+7,464,000	-1,000,000	-1,000,000
PENSION BENEFIT GUARANTY CORPORATION							
Program Administration subject to limitation (Trust Funds)	(41,641,000)	(47,787,000)	(47,787,000)	(47,787,000)	(+6,146,000)	---	---
Services related to terminations not subject to limitations (Trust Funds)	(27,773,000)	(25,025,000)	(25,025,000)	(25,025,000)	(-2,748,000)	---	---
Total, PBGC (trust funds)	(69,414,000)	(72,812,000)	(72,812,000)	(72,812,000)	(+3,398,000)	---	---
EMPLOYMENT STANDARDS ADMINISTRATION							
SALARIES AND EXPENSES							
Enforcement of wage and hour standards	91,295,000	97,336,000	97,336,000	96,586,000	+5,291,000	-750,000	-750,000
Federal contractor EEO standards enforcement	52,585,000	55,909,000	55,909,000	55,909,000	+3,324,000	---	---
Federal programs for workers' compensation	60,427,000	67,985,000	67,985,000	67,985,000	+7,558,000	---	---
Trust funds	(992,000)	(1,035,000)	(1,035,000)	(1,035,000)	(+43,000)	---	---
Executive direction and support services	10,846,000	11,396,000	11,396,000	10,846,000	---	-550,000	-550,000
Total, salaries and expenses	216,145,000	233,661,000	233,661,000	232,361,000	+16,216,000	-1,300,000	-1,300,000
Federal funds	215,153,000	232,626,000	232,626,000	231,326,000	+16,173,000	-1,300,000	-1,300,000
Trust funds	(992,000)	(1,035,000)	(1,035,000)	(1,035,000)	(+43,000)	---	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION, AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
SPECIAL BENEFITS							
Federal employees compensation benefits...............	318,000,000	188,000,000	188,000,000	188,000,000	-130,000,000	---	---
Longshore and harbor workers' benefits................	4,000,000	4,000,000	4,000,000	4,000,000	---	---	---
Total, Special Benefits..........................	322,000,000	192,000,000	192,000,000	192,000,000	-130,000,000	---	---
BLACK LUNG DISABILITY TRUST FUND							
Benefit payments and interest on advances............	866,019,000	861,135,000	861,135,000	861,135,000	-4,884,000	---	---
Employment Standards Admin., salaries & expenses......	28,900,000	30,145,000	30,145,000	30,145,000	+1,245,000	---	---
Departmental Management, salaries and expenses........	23,171,000	25,579,000	25,579,000	25,579,000	+2,408,000	---	---
Departmental Management, inspector general............	371,000	333,000	333,000	333,000	-38,000	---	---
Subtotal, Black Lung Disablty. Trust Fund, apprn	918,461,000	917,192,000	917,192,000	917,192,000	-1,269,000	---	---
Treasury administrative costs (indefinite)............	756,000	756,000	756,000	756,000	---	---	---
Total, Black Lung Disability Trust Fund.........	919,217,000	917,948,000	917,948,000	917,948,000	-1,269,000	---	---
Total, Employment Standards Administration......	1,457,362,000	1,343,609,000	1,343,609,000	1,342,309,000	-115,053,000	-1,300,000	-1,300,000
Federal funds................................	1,456,370,000	1,342,574,000	1,342,574,000	1,341,274,000	-115,096,000	-1,300,000	-1,300,000
Trust funds..................................	(992,000)	(1,035,000)	(1,035,000)	(1,035,000)	(+43,000)	---	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with		
					FY 1991	FY 1992 Budget	House Bill
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION							
SALARIES AND EXPENSES							
Safety and health standards	7,620,000	8,078,000	8,078,000	8,078,000	+458,000	---	---
Enforcement:							
Federal Enforcement	123,935,000	133,508,000	133,508,000	134,508,000	+10,573,000	+1,000,000	+1,000,000
State programs	63,731,000	66,344,000	66,344,000	66,344,000	+2,613,000	---	---
Technical Support	16,684,000	17,708,000	17,708,000	17,708,000	+1,024,000	---	---
Compliance Assistance	37,370,000	38,942,000	38,942,000	41,442,000	+4,072,000	+2,500,000	+2,500,000
Safety and health statistics	29,116,000	30,390,000	30,390,000	30,390,000	+1,274,000	---	---
Executive direction and administration	6,737,000	7,137,000	7,137,000	6,737,000	---	-400,000	-400,000
Total, OSHA	285,193,000	302,107,000	302,107,000	305,207,000	+20,014,000	+3,100,000	+3,100,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
MINE SAFETY AND HEALTH ADMINISTRATION							
SALARIES AND EXPENSES							
Enforcement:							
Coal	87,338,000	94,750,000	94,750,000	95,100,000	+7,762,000	+350,000	+350,000
Metal/nonmetal	35,223,000	37,718,000	37,718,000	37,718,000	+2,495,000	---	---
Standards development	1,363,000	1,516,000	1,516,000	1,516,000	+153,000	---	---
Assessments	2,313,000	2,455,000	2,455,000	2,455,000	+142,000	---	---
Educational policy and development	14,953,000	14,152,000	14,152,000	15,152,000	+199,000	+1,000,000	+1,000,000
Technical support	20,563,000	21,322,000	21,322,000	21,615,000	+1,052,000	+293,000	+293,000
Program administration	11,808,000	14,244,000	14,244,000	11,808,000	---	-2,436,000	-2,436,000
Total, Mine Safety and Health Administration	173,561,000	186,157,000	186,157,000	185,364,000	+11,803,000	-793,000	-793,000
BUREAU OF LABOR STATISTICS							
SALARIES AND EXPENSES							
Employment and Unemployment Statistics	67,159,000	85,709,000	85,709,000	75,549,000	+8,390,000	-10,160,000	-10,160,000
Labor Market Information (Trust Funds)	(51,488,000)	(50,399,000)	(50,399,000)	(48,599,000)	(-2,889,000)	(-1,800,000)	(-1,800,000)
Prices and cost of living	74,336,000	85,000,000	85,000,000	80,960,000	+6,624,000	-4,040,000	-4,040,000
Wages and industrial relations	25,738,000	45,216,000	45,216,000	29,366,000	+3,628,000	-15,850,000	-15,850,000
Productivity and technology	5,699,000	6,316,000	6,316,000	6,316,000	+617,000	---	---
Economic growth and employment projections	3,479,000	3,844,000	3,844,000	3,844,000	+365,000	---	---
Executive direction and staff services	27,258,000	32,419,000	32,419,000	27,258,000	---	-5,161,000	-5,161,000
Total, Bureau of Labor Statistics	255,157,000	308,903,000	308,903,000	271,892,000	+16,735,000	-37,011,000	-37,011,000
Federal Funds	203,669,000	258,504,000	258,504,000	223,293,000	+19,624,000	-35,211,000	-35,211,000
Trust Funds	(51,488,000)	(50,399,000)	(50,399,000)	(48,599,000)	(-2,889,000)	(-1,800,000)	(-1,800,000)

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
DEPARTMENTAL MANAGEMENT							
SALARIES AND EXPENSES							
Executive direction	21,419,000	27,911,000	24,911,000	21,419,000	---	-6,492,000	-3,492,000
Legal services	52,722,000	58,588,000	58,588,000	56,985,000	+4,263,000	-1,603,000	-1,603,000
Trust funds	(278,000)	(332,000)	(332,000)	(332,000)	(+54,000)	---	---
International labor affairs	6,572,000	7,284,000	7,284,000	7,284,000	+712,000	---	---
Administration and management	20,209,000	21,812,000	21,175,000	21,812,000	+1,603,000	---	+637,000
Adjudication	14,603,000	16,187,000	16,187,000	16,187,000	+1,584,000	---	---
Promoting employment of the disabled	4,077,000	4,078,000	4,078,000	4,740,000	+663,000	+662,000	+662,000
Women's Bureau	7,413,000	7,562,000	7,562,000	8,319,000	+906,000	+757,000	+757,000
Civil Rights Activities	4,338,000	4,534,000	4,534,000	4,534,000	+196,000	---	---
Total, Salaries and expenses	131,631,000	148,288,000	144,651,000	141,612,000	+9,981,000	-6,676,000	-3,039,000
Federal funds	131,353,000	147,956,000	144,319,000	141,280,000	+9,927,000	-6,676,000	-3,039,000
Trust funds	(278,000)	(332,000)	(332,000)	(332,000)	(+54,000)	---	---
VETERANS EMPLOYMENT AND TRAINING							
State Administration:							
Disabled Veterans Outreach Program	(77,170,000)	(34,910,000)	(79,170,000)	(79,170,000)	(+2,000,000)	(+44,260,000)	---
Local Veterans Employment Program	(71,095,000)	(74,223,000)	(73,095,000)	(73,095,000)	(+2,000,000)	(-1,128,000)	---
Subtotal, State Administration	(148,265,000)	(109,133,000)	(152,265,000)	(152,265,000)	(+4,000,000)	(+43,132,000)	---
Federal Administration	(21,180,000)	(20,054,000)	(20,054,000)	(20,054,000)	(-1,126,000)	---	---
National Veterans Training Institute	(2,440,000)	---	(2,440,000)	(2,440,000)	---	(+2,440,000)	---
Total, Trust Funds	(171,885,000)	(129,187,000)	(174,759,000)	(174,759,000)	(+2,874,000)	(+45,572,000)	---

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
OFFICE OF THE INSPECTOR GENERAL							
Audit:							
Federal funds	20,693,000	20,673,000	20,673,000	20,673,000	-20,000	---	---
Trust funds	(3,784,000)	(4,023,000)	(4,023,000)	(4,023,000)	(+239,000)	---	---
Investigation:							
Federal funds	7,729,000	8,245,000	8,245,000	8,245,000	+516,000	---	---
Trust funds	(310,000)	(334,000)	(334,000)	(334,000)	(+24,000)	---	---
Office of Labor Racketeering	10,495,000	11,322,000	11,322,000	11,322,000	+827,000	---	---
Executive Direction and Management	5,119,000	6,396,000	6,396,000	5,119,000	---	-1,277,000	-1,277,000
Total, Office of the Inspector General	48,130,000	50,993,000	50,993,000	49,716,000	+1,586,000	-1,277,000	-1,277,000
Federal funds	44,036,000	46,636,000	46,636,000	45,359,000	+1,323,000	-1,277,000	-1,277,000
Trust funds	(4,094,000)	(4,357,000)	(4,357,000)	(4,357,000)	(+263,000)	---	---
Total, Departmental Management	351,646,000	328,468,000	370,403,000	366,087,000	+14,441,000	+37,619,000	-4,316,000
Federal funds	175,389,000	194,592,000	190,955,000	186,639,000	+11,250,000	-7,953,000	-4,316,000
Trust funds	(176,257,000)	(133,876,000)	(179,448,000)	(179,448,000)	(+3,191,000)	(+45,572,000)	---
Undistributed salaries and expenses reduction	---	---	-30,000,000	---	---	---	+30,000,000
Total, Labor Department	10,886,694,000	10,734,583,000	10,947,721,000	11,037,376,000	+150,682,000	+302,793,000	+89,655,000
Federal funds	7,541,537,000	7,336,447,000	7,435,073,000	7,500,045,000	-41,492,000	+163,598,000	+64,972,000
Trust funds	(3,345,157,000)	(3,398,136,000)	(3,512,648,000)	(3,537,331,000)	(+192,174,000)	(+139,195,000)	(+24,683,000)

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with		
					FY 1991	FY 1992 Budget	House Bill
TITLE II--DEPARTMENT OF HEALTH AND HUMAN SERVICES							
HEALTH RESOURCES AND SERVICES ADMINISTRATION							
HEALTH RESOURCES AND SERVICES							
Health Care Delivery and Assistance:							
Community health centers	478,191,000	478,191,000	547,520,000	478,191,000	---	---	-69,329,000
Transfer from "Educational excellence"	---	---	---	(49,000,000)	(+49,000,000)	(+49,000,000)	(+49,000,000)
Subtotal, Community Health Centers	(478,191,000)	(478,191,000)	(547,520,000)	(527,191,000)	(+49,000,000)	(+49,000,000)	(-20,329,000)
HUD health service grants	3,416,000	3,000,000	7,500,000	4,692,000	+1,276,000	+1,692,000	-2,808,000
Healthy start	25,000,000	138,659,000	69,330,000	75,000,000	+50,000,000	-63,659,000	+5,670,000
Total, Community Health Services	506,607,000	619,850,000	624,350,000	557,883,000	+51,276,000	-61,967,000	-66,467,000
Migrant health	51,723,000	51,723,000	51,723,000	53,700,000	+1,977,000	+1,977,000	+1,977,000
Transfer from "Educational excellence"	---	---	---	(6,000,000)	(+6,000,000)	(+6,000,000)	(+6,000,000)
Subtotal, Migrant Health Centers	(51,723,000)	(51,723,000)	(51,723,000)	(59,700,000)	(+7,977,000)	(+7,977,000)	(+7,977,000)
Black lung clinics	3,708,000	3,708,000	3,708,000	4,000,000	+292,000	+292,000	+292,000
Health care for the homeless	39,036,000	63,041,000	51,000,000	61,041,000	+22,005,000	-2,000,000	+10,041,000
Family planning	144,311,000	150,000,000	---	162,000,000	+17,689,000	+12,000,000	+162,000,000
National Health Service Corps:							
Field placements	42,256,000	42,256,000	42,256,000	42,256,000	---	---	---
Loans and scholarships	48,795,000	53,795,000	58,795,000	58,795,000	+10,000,000	+5,000,000	---
Subtotal, Natl Health Service Corps	91,051,000	96,051,000	101,051,000	101,051,000	+10,000,000	+5,000,000	---
Hansen's Disease services (Carville)	19,792,000	19,489,000	19,489,000	19,489,000	-303,000	---	---
Payment to Hawaii, treatment of Hansen's Disease	3,383,000	3,000,000	3,000,000	3,000,000	-383,000	---	---
Home health demonstration grants	2,928,000	---	---	---	-2,928,000	---	---
Alzheimer's care grants	---	---	---	5,000,000	+5,000,000	+5,000,000	+5,000,000
Total, Health Care Delivery & Assistance	862,539,000	1,006,862,000	854,321,000	967,164,000	+104,625,000	-39,698,000	+112,843,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Health Professions:							
Exceptional need scholarships	9,759,000	10,400,000	9,759,000	9,759,000	---	-641,000	---
Minority centers of excellence	11,711,000	14,920,000	27,920,000	14,140,000	+2,429,000	-780,000	-13,780,000
Public health special projects	3,757,000	---	3,757,000	4,557,000	+800,000	+4,557,000	+800,000
Health administration grants	1,554,000	---	1,554,000	1,554,000	---	+1,554,000	---
Public health traineeships	3,416,000	---	3,416,000	3,416,000	---	+3,416,000	---
Health administration traineeships	484,000	---	484,000	484,000	---	+484,000	---
Preventive medicine residencies	1,654,000	---	1,654,000	1,654,000	---	+1,654,000	---
Family medicine residencies	36,108,000	---	36,108,000	32,000,000	-4,108,000	+32,000,000	-4,108,000
General dentistry residencies	3,834,000	---	3,834,000	3,834,000	---	+3,834,000	---
General internal medicine and pediatrics	17,256,000	---	17,256,000	16,250,000	-1,006,000	+16,250,000	-1,006,000
Family medicine departments	6,831,000	---	6,831,000	6,400,000	-431,000	+6,400,000	-431,000
Physician assistants	5,021,000	---	5,021,000	5,021,000	---	+5,021,000	---
Area health education centers	19,237,000	---	19,237,000	19,237,000	---	+19,237,000	---
Health education and training centers	3,904,000	---	3,904,000	3,904,000	---	+3,904,000	---
Health professions data analysis	1,762,000	---	1,762,000	1,762,000	---	+1,762,000	---
Disadvantaged assistance	30,817,000	32,841,000	30,817,000	30,817,000	---	-2,024,000	---
Disadvantaged minority health improvement	13,174,000	10,734,000	23,234,000	10,734,000	-2,440,000	---	-12,500,000
Minority HPSL initiative	2,928,000	15,000,000	15,000,000	14,928,000	+12,000,000	-72,000	-72,000
Allied health grants and contracts	1,659,000	---	1,659,000	4,000,000	+2,341,000	+4,000,000	+2,341,000
Interdisciplinary traineeships	4,392,000	---	4,392,000	5,000,000	+608,000	+5,000,000	+608,000
Health professions spec ed initiatives	2,398,000	---	2,398,000	2,398,000	---	+2,398,000	---
Geriatric centers and training	13,708,000	---	13,708,000	13,708,000	---	+13,708,000	---
Pacific Basin activities (including Medical officer training)	2,440,000	---	2,440,000	2,608,000	+168,000	+2,608,000	+168,000
Native Hawaiian health care	3,416,000	---	3,416,000	3,600,000	+184,000	+3,600,000	+184,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
National practitioner data bank	1,926,000	5,000,000	7,000,000	5,000,000	+3,074,000	---	-2,000,000
User fees	---	-5,000,000	-5,000,000	-5,000,000	-5,000,000	---	---
Nurse training:							
Advanced nurse education	12,463,000	---	12,463,000	12,463,000	---	+12,463,000	---
Nurse practitioners / nurse midwives	14,639,000	---	14,639,000	14,639,000	---	+14,639,000	---
Special projects	10,532,000	---	10,532,000	11,000,000	+468,000	+11,000,000	+468,000
Traineeships	13,664,000	---	13,664,000	14,151,000	+487,000	+14,151,000	+487,000
Nurse anesthetists	1,430,000	---	1,430,000	1,930,000	+500,000	+1,930,000	+500,000
Undergraduate scholarships	2,380,000	---	2,380,000	2,380,000	---	+2,380,000	---
Loan repayment for shortage area service	1,455,000	---	1,455,000	1,455,000	---	+1,455,000	---
Nurse disadvantaged assistance	3,416,000	4,160,000	3,416,000	3,416,000	---	-744,000	---
Subtotal, Nurse training	59,979,000	4,160,000	59,979,000	61,434,000	+1,455,000	+57,274,000	+1,455,000
Total, Health professions	263,125,000	88,055,000	301,540,000	273,199,000	+10,074,000	+185,144,000	-28,341,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
MCH and Resources Development:							
Maternal & child health block grant	587,310,000	553,627,000	580,000,000	686,000,000	+98,690,000	+132,373,000	+106,000,000
Pediatric emergency care	4,880,000	---	4,880,000	4,880,000	---	+4,880,000	---
Organ transplantation	3,723,000	3,387,000	5,137,000	3,387,000	-336,000	---	-1,750,000
Health teaching facilities interest subsidies	476,000	450,000	450,000	450,000	-26,000	---	---
Perinatal facilities	976,000	---	---	---	-976,000	---	---
Total, Resources Development	597,365,000	557,464,000	590,467,000	694,717,000	+97,352,000	+137,253,000	+104,250,000
Buildings and facilities	1,844,000	---	---	---	-1,844,000	---	---
Rural health research	4,674,000	4,139,000	4,139,000	5,000,000	+326,000	+861,000	+861,000
Rural outreach grants	19,518,000	---	---	25,000,000	+5,482,000	+25,000,000	+25,000,000
Acquired Immune Deficiency Syndrome (AIDS):							
Training of health personnel	17,029,000	17,029,000	17,029,000	17,029,000	---	---	---
Facilities renovation grants	4,029,000	4,029,000	---	---	-4,029,000	-4,029,000	---
Pediatric health care demonstrations	19,518,000	19,518,000	19,518,000	20,000,000	+482,000	+482,000	+482,000
Ryan White AIDS Programs:							
Emergency assistance	87,831,000	87,831,000	100,000,000	122,137,000	+34,306,000	+34,306,000	+22,137,000
Comprehensive care programs	87,831,000	87,831,000	91,819,000	122,137,000	+34,306,000	+34,306,000	+30,318,000
Early intervention program	44,891,000	44,891,000	55,000,000	44,891,000	---	---	-10,109,000
Subtotal, Ryan White AIDS programs	220,553,000	220,553,000	246,819,000	289,165,000	+68,612,000	+68,612,000	+42,346,000
Subtotal, AIDS	261,129,000	261,129,000	283,366,000	326,194,000	+65,065,000	+65,065,000	+42,828,000
Program management including AIDS	98,548,000	100,851,000	103,700,000	98,548,000	---	-2,303,000	-5,152,000
Total, Health resources and services	2,108,742,000	2,018,500,000	2,137,533,000	2,389,822,000	+281,080,000	+371,322,000	+252,289,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
MEDICAL FACILITIES GUARANTEE AND LOAN FUND:							
Interest subsidy program	20,000,000	19,000,000	19,000,000	19,000,000	-1,000,000	---	---
HEALTH EDUCATION ASSISTANCE LOANS PROGRAM (HEAL):							
New loan subsidies	---	21,813,000	30,000,000	30,000,000	+30,000,000	+8,187,000	---
Liquidating account	---	35,502,000	48,000,000	48,000,000	+48,000,000	+12,498,000	---
HEAL loan limitation (non-add)	(260,000,000)	(185,000,000)	(260,000,000)	---	(-260,000,000)	(-185,000,000)	(-260,000,000)
Subtotal	---	57,315,000	78,000,000	78,000,000	+78,000,000	+20,685,000	---
Program management	1,400,000	1,500,000	1,500,000	1,500,000	+100,000	---	---
Total, HEAL	1,400,000	58,815,000	79,500,000	79,500,000	+78,100,000	+20,685,000	---
VACCINE INJURY COMPENSATION:							
Pre - FY89 claims (appropriation)	79,920,000	---	80,000,000	80,000,000	+80,000	+80,000,000	---
Post - FY88 claims (trust fund)	154,080,000	84,920,000	84,920,000	84,920,000	-69,160,000	---	---
HRSA administration (trust fund)	2,500,000	2,000,000	2,500,000	2,500,000	---	+500,000	---
Subtotal, Vaccine injury compensation	236,500,000	86,920,000	167,420,000	167,420,000	-69,080,000	+80,500,000	---
Total, Health Resources and Services Administration	2,366,642,000	2,183,235,000	2,403,453,000	2,655,742,000	+289,100,000	+472,507,000	+252,289,000

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
CENTERS FOR DISEASE CONTROL							
DISEASE CONTROL							
Preventive Health Services Block Grant	92,702,000	107,472,000	92,702,000	150,000,000	+57,298,000	+42,528,000	+57,298,000
Prevention centers	4,367,000	3,949,000	4,367,000	6,000,000	+1,633,000	+2,051,000	+1,633,000
Lead poisoning prevention	7,790,000	14,949,000	7,790,000	25,000,000	+17,210,000	+10,051,000	+17,210,000
Sexually transmitted diseases:							
Grants	73,638,000	77,638,000	73,638,000	77,638,000	+4,000,000	---	+4,000,000
Direct operations	11,330,000	11,910,000	11,330,000	11,910,000	+580,000	---	+580,000
Subtotal, Sexually transmitted diseases	84,968,000	89,548,000	84,968,000	89,548,000	+4,580,000	---	+4,580,000
Immunization:							
Grants	182,004,000	208,865,000	248,865,000	223,865,000	+41,861,000	+15,000,000	-25,000,000
Direct operations	30,129,000	46,510,000	46,510,000	51,510,000	+21,381,000	+5,000,000	+5,000,000
Vaccine stockpile	2,928,000	---	---	---	-2,928,000	---	---
Adverse events reporting	2,470,000	2,470,000	2,470,000	2,470,000	---	---	---
Subtotal, Immunization programs	217,531,000	257,845,000	297,845,000	277,845,000	+60,314,000	+20,000,000	-20,000,000
Infectious disease excluding AIDS/TB	43,689,000	45,179,000	45,179,000	49,579,000	+5,890,000	+4,400,000	+4,400,000
Tuberculosis grants	9,109,000	12,334,000	13,334,000	12,334,000	+3,225,000	---	-1,000,000
Chronic & environmental disease prevention	51,408,000	56,664,000	56,664,000	76,264,000	+24,856,000	+19,600,000	+19,600,000
Breast and cervical cancer screening	29,259,000	50,000,000	50,000,000	50,000,000	+20,741,000	---	---
Injury control	24,036,000	26,066,000	26,066,000	28,066,000	+4,030,000	+2,000,000	+2,000,000
Occupational Safety and Health (NIOSH):							
Research	86,508,000	86,508,000	86,508,000	97,886,000	+11,378,000	+11,378,000	+11,378,000
Training	10,472,000	10,472,000	10,472,000	10,972,000	+500,000	+500,000	+500,000
Subtotal, NIOSH	96,980,000	96,980,000	96,980,000	108,858,000	+11,878,000	+11,878,000	+11,878,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
National Center for Health Statistics:							
Program operations	48,301,000	48,301,000	48,301,000	48,301,000	---	---	---
Program support	3,105,000	3,105,000	3,105,000	3,105,000	---	---	---
1% evaluation funds (non-add)	(19,000,000)	(33,800,000)	(25,000,000)	(33,800,000)	(+14,800,000)	---	(+8,800,000)
Subtotal, health statistics	51,406,000	51,406,000	51,406,000	51,406,000	---	---	---
Epidemic services	68,714,000	78,228,000	73,714,000	79,728,000	+11,014,000	+1,500,000	+6,014,000
Buildings and facilities	31,951,000	8,338,000	6,338,000	38,338,000	+6,387,000	+30,000,000	+32,000,000
Program management	3,016,000	3,309,000	3,309,000	3,016,000	---	-293,000	-293,000
Acquired Immune Deficiency Syndrome (AIDS)	494,660,000	494,660,000	480,000,000	480,000,000	-14,660,000	-14,660,000	---
Total, Disease Control	1,311,586,000	1,396,927,000	1,390,662,000	1,525,982,000	+214,396,000	+129,055,000	+135,320,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
NATIONAL INSTITUTES OF HEALTH (INCLUDES AIDS)							
National Cancer Institute	1,676,507,000	1,772,560,000	1,793,257,000	1,972,978,000	+296,471,000	+200,418,000	+179,721,000
Research training	37,252,000	37,670,000	37,252,000	37,252,000	---	-418,000	---
Subtotal	1,713,759,000	1,810,230,000	1,830,509,000	2,010,230,000	+296,471,000	+200,000,000	+179,721,000
National Heart, Lung, and Blood Institute	1,080,251,000	1,162,725,000	1,155,707,000	1,143,705,000	+63,454,000	-19,020,000	-12,002,000
Research training	46,691,000	47,199,000	46,691,000	46,691,000	---	-508,000	---
Subtotal	1,126,942,000	1,209,924,000	1,202,398,000	1,190,396,000	+63,454,000	-19,528,000	-12,002,000
National Institute of Dental Research	142,867,000	154,771,000	155,184,000	152,215,000	+9,348,000	-2,556,000	-2,969,000
Research training	6,051,000	6,168,000	6,051,000	6,051,000	---	-117,000	---
Subtotal	148,918,000	160,939,000	161,235,000	158,266,000	+9,348,000	-2,673,000	-2,969,000
National Institute of Diabetes, Digestive, and Kidney Diseases	590,853,000	633,863,000	643,401,000	628,442,000	+37,589,000	-5,421,000	-14,959,000
Research training	24,419,000	24,694,000	24,419,000	24,419,000	---	-275,000	---
Subtotal	615,272,000	658,557,000	667,820,000	652,861,000	+37,589,000	-5,696,000	-14,959,000
National Institute of Neurological Disorders and Stroke	528,398,000	569,838,000	570,010,000	570,041,000	+41,643,000	+203,000	+31,000
Research training	13,345,000	13,517,000	13,345,000	13,345,000	---	-172,000	---
Subtotal	541,743,000	583,355,000	583,355,000	583,386,000	+41,643,000	+31,000	+31,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
National Institute of Allergy and Infectious Diseases	887,089,000	955,581,000	952,643,000	939,765,000	+52,676,000	-15,816,000	-12,878,000
Research training	20,187,000	21,130,000	20,187,000	20,187,000	---	-943,000	---
Subtotal	907,276,000	976,711,000	972,830,000	959,952,000	+52,676,000	-16,759,000	-12,878,000
National Institute of General Medical Sciences	667,930,000	738,292,000	728,080,000	723,078,000	+55,148,000	-15,214,000	-5,002,000
Research training	92,080,000	94,888,000	92,080,000	92,080,000	---	-2,808,000	---
Subtotal	760,010,000	833,180,000	820,160,000	815,158,000	+55,148,000	-18,022,000	-5,002,000
National Institute of Child Health and Human Development	462,584,000	503,137,000	508,289,000	507,454,000	+44,870,000	+4,317,000	-835,000
Research training	16,372,000	17,447,000	16,372,000	16,372,000	---	-1,075,000	---
Subtotal	478,956,000	520,584,000	524,661,000	523,826,000	+44,870,000	+3,242,000	-835,000
National Eye Institute	245,947,000	264,767,000	264,966,000	259,935,000	+13,988,000	-4,832,000	-5,031,000
Research training	7,294,000	7,493,000	7,294,000	7,294,000	---	-199,000	---
Subtotal	253,241,000	272,260,000	272,260,000	267,229,000	+13,988,000	-5,031,000	-5,031,000
National Institute of Environmental Health Sciences	230,122,000	243,472,000	244,006,000	239,967,000	+9,845,000	-3,505,000	-4,039,000
Research training	10,906,000	11,012,000	10,906,000	10,906,000	---	-106,000	---
Subtotal	241,028,000	254,484,000	254,912,000	250,873,000	+9,845,000	-3,611,000	-4,039,000
National Institute on Aging	313,969,000	338,664,000	352,745,000	353,393,000	+39,424,000	+14,729,000	+648,000
Research training	9,783,000	9,894,000	9,783,000	9,783,000	---	-111,000	---
Subtotal	323,752,000	348,558,000	362,528,000	363,176,000	+39,424,000	+14,618,000	+648,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with		
					FY 1991	FY 1992 Budget	House Bill
National Institute of Arthritis and Musculoskeletal and Skin Diseases	186,393,000	197,859,000	198,123,000	196,222,000	+9,829,000	-1,637,000	-1,901,000
Research training	6,854,000	6,938,000	6,854,000	6,854,000	---	-84,000	---
Subtotal	193,247,000	204,797,000	204,977,000	203,076,000	+9,829,000	-1,721,000	-1,901,000
National Institute on Deafness and Other Communication Disorders	130,950,000	142,287,000	140,510,000	147,623,000	+16,673,000	+5,336,000	+7,113,000
Research training	3,985,000	4,034,000	3,985,000	3,985,000	---	-49,000	---
Subtotal	134,935,000	146,321,000	144,495,000	151,608,000	+16,673,000	+5,287,000	+7,113,000
National Center for Research Resources	332,589,000	318,230,000	306,534,000	314,561,000	-18,028,000	-3,669,000	+8,027,000
Research training	2,666,000	2,745,000	2,666,000	2,666,000	---	-79,000	---
Subtotal	335,255,000	320,975,000	309,200,000	317,227,000	-18,028,000	-3,748,000	+8,027,000
National Center for Nursing Research	35,330,000	39,247,000	38,751,000	41,488,000	+6,158,000	+2,241,000	+2,737,000
Research training	4,392,000	4,500,000	4,392,000	4,392,000	---	-108,000	---
Subtotal	39,722,000	43,747,000	43,143,000	45,880,000	+6,158,000	+2,133,000	+2,737,000
National Center for Human Genome Research	83,309,000	105,178,000	89,006,000	105,200,000	+21,891,000	+22,000	+16,194,000
Research training	4,109,000	5,309,000	4,109,000	4,109,000	---	-1,200,000	---
Subtotal	87,418,000	110,487,000	93,115,000	109,309,000	+21,891,000	-1,178,000	+16,194,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
John E. Fogarty International Center..................	17,519,000	19,922,000	19,922,000	19,922,000	+2,403,000	---	---
National Library of Medicine:							
Regular program....................................	66,251,000	73,308,000	74,408,000	75,392,000	+9,141,000	+2,084,000	+984,000
Medical library assistance........................	14,691,000	16,309,000	14,691,000	14,691,000	---	-1,618,000	---
Biotechnology information.........................	10,466,000	10,937,000	10,466,000	10,466,000	---	-471,000	---
Subtotal..	91,408,000	100,554,000	99,565,000	100,549,000	+9,141,000	-5,000	+984,000
Office of the Director...............................	97,651,000	95,176,000	149,176,000	133,724,000	+36,073,000	+38,548,000	-15,452,000
Buildings and facilities.............................	168,687,000	104,125,000	108,625,000	102,885,000	-65,802,000	-1,240,000	-5,740,000
Total, N.I.H. funding including AIDS............	8,276,739,000	8,774,886,000	8,824,886,000	8,959,533,000	+682,794,000	+184,647,000	+134,647,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION							
ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH (INCLUDES AIDS)							
National Institute of Mental Health:							
Research	455,500,000	491,754,000	491,754,000	491,754,000	+36,254,000	---	---
Instrumentation grants	1,323,000	1,338,000	1,323,000	1,338,000	+15,000	---	+15,000
Research training	26,942,000	27,701,000	26,942,000	27,701,000	+759,000	---	+759,000
Clinical training	13,670,000	---	8,000,000	13,670,000	---	+13,670,000	+5,670,000
Community support demonstrations	24,885,000	25,880,000	24,885,000	25,880,000	+995,000	---	+995,000
Prevention demonstrations	4,880,000	5,075,000	4,880,000	6,075,000	+1,195,000	+1,000,000	+1,195,000
Grants to States for the homeless (PATH)	26,153,000	43,116,000	26,153,000	26,153,000	---	-16,963,000	---
Homeless services demonstrations	5,861,000	---	5,861,000	5,861,000	---	+5,861,000	---
Homeless research demonstrations	---	20,000,000	---	---	---	-20,000,000	---
Protection and advocacy	15,614,000	---	15,614,000	19,500,000	+3,886,000	+19,500,000	+3,886,000
Direct operations	40,982,000	43,982,000	43,982,000	40,982,000	---	-3,000,000	-3,000,000
Subtotal, mental health	615,810,000	658,846,000	649,394,000	658,914,000	+43,104,000	+68,000	+9,520,000
National Institute on Drug Abuse:							
Research	257,896,000	284,624,000	270,000,000	275,000,000	+17,104,000	-9,624,000	+5,000,000
Instrumentation grants	504,000	524,000	504,000	524,000	+20,000	---	+20,000
Research training	6,783,000	7,020,000	6,783,000	7,020,000	+237,000	---	+237,000
Treatment demonstrations	45,465,000	46,955,000	46,955,000	46,955,000	+1,490,000	---	---
AIDS demonstrations	73,193,000	71,550,000	71,550,000	71,550,000	-1,643,000	---	---
Direct operations	32,186,000	35,552,000	35,552,000	32,186,000	---	-3,366,000	-3,366,000
Subtotal, drug abuse	416,027,000	446,225,000	431,344,000	433,235,000	+17,208,000	-12,990,000	+1,891,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
National Institute on Alcoholism and Alcohol Abuse:							
Research	138,849,000	149,932,000	149,932,000	154,932,000	+16,083,000	+5,000,000	+5,000,000
Instrumentation grants	575,000	581,000	575,000	581,000	+6,000	---	+6,000
Research training	3,542,000	3,666,000	3,542,000	3,666,000	+124,000	---	+124,000
Substance abuse homeless demonstrations	15,983,000	---	15,983,000	15,983,000	---	+15,983,000	---
Direct operations	11,789,000	12,596,000	12,596,000	11,789,000	---	-807,000	-807,000
Subtotal, alcoholism	170,738,000	166,775,000	182,628,000	186,951,000	+16,213,000	+20,176,000	+4,323,000
Office for Treatment Improvement:							
Alcohol, Drug Abuse and Mental Health block grant	1,268,670,000	1,268,670,000	1,235,000,000	1,405,670,000	+137,000,000	+137,000,000	+170,670,000
Treatment grants to crisis areas	31,296,000	32,548,000	31,296,000	35,986,000	+4,690,000	+3,438,000	+4,690,000
Treatment improvement grants	83,363,000	86,698,000	83,363,000	83,363,000	---	-3,335,000	---
Capacity expansion program	---	68,000,000	---	---	---	-68,000,000	---
Transfer from forfeiture fund	---	(31,000,000)	(31,000,000)	(31,000,000)	(+31,000,000)	---	---
Treatment waiting list grants reappropriation	38,545,000	---	---	---	-38,545,000	---	---
Direct operations	5,209,000	7,718,000	7,718,000	5,209,000	---	-2,509,000	-2,509,000
Subtotal, Treatment improvement	1,427,083,000	1,463,634,000	1,357,377,000	1,530,228,000	+103,145,000	+66,594,000	+172,851,000
Office for Substance Abuse Prevention:							
Prevention programs	112,003,000	125,505,000	112,003,000	135,500,000	+23,497,000	+9,995,000	+23,497,000
Community youth activity program	20,162,000	---	15,162,000	4,669,000	-15,493,000	+4,669,000	-10,493,000
Community prevention grants	99,118,000	113,852,000	99,118,000	109,183,000	+10,065,000	-4,669,000	+10,065,000
Training	25,986,000	25,986,000	25,986,000	20,986,000	-5,000,000	-5,000,000	-5,000,000
Direct operations	14,200,000	16,237,000	16,237,000	14,200,000	---	-2,037,000	-2,037,000
Subtotal, Substance Abuse Prevention	271,469,000	281,580,000	268,506,000	284,538,000	+13,069,000	+2,958,000	+16,032,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Treatment outcome evaluations	8,134,000	8,598,000	8,598,000	8,598,000	+464,000	---	---
Buildings and facilities	7,775,000	7,775,000	5,000,000	5,000,000	-2,775,000	-2,775,000	---
Office of the Administrator	11,368,000	14,895,000	14,895,000	11,368,000	---	-3,527,000	-3,527,000
Total, Alcohol, Drug Abuse & Mental Health	2,928,404,000	3,048,328,000	2,917,742,000	3,118,832,000	+190,428,000	+70,504,000	+201,090,000
ST. ELIZABETHS HOSPITAL	11,711,000	---	---	---	-11,711,000	---	---
Total, Alcohol, Drug Abuse & Mental Health Admin	2,940,115,000	3,048,328,000	2,917,742,000	3,118,832,000	+178,717,000	+70,504,000	+201,090,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
ASSISTANT SECRETARY FOR HEALTH							
OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH							
Population affairs:							
Adolescent family life	7,789,000	12,000,000	---	---	-7,789,000	-12,000,000	---
Health Initiatives :							
Office of Disease Prevention and Health Promotion	4,577,000	4,577,000	4,027,000	5,000,000	+423,000	+423,000	+973,000
Physical fitness and sports	1,443,000	1,443,000	1,443,000	1,443,000	---	---	---
Minority health	14,470,000	15,016,000	15,016,000	15,016,000	+546,000	---	---
National vaccine program	9,631,000	2,300,000	12,500,000	2,300,000	-7,331,000	---	-10,200,000
Health Service Management	21,020,000	21,220,000	21,770,000	21,770,000	+750,000	+550,000	---
Acquired Immune Deficiency Syndrome (AIDS)	8,238,000	8,773,000	8,773,000	8,773,000	+535,000	---	---
Undistributed	---	---	5,789,000	---	---	---	-5,789,000
Total, OASH	67,168,000	65,329,000	69,318,000	54,302,000	-12,866,000	-11,027,000	-15,016,000
RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED OFFICERS							
Retirement payments	95,717,000	104,303,000	104,303,000	104,303,000	+8,586,000	---	---
Survivors benefits	5,926,000	6,650,000	6,650,000	6,650,000	+724,000	---	---
Dependent's medical care	19,230,000	20,499,000	20,499,000	20,499,000	+1,269,000	---	---
Military Services Credits	3,399,000	3,222,000	3,222,000	3,222,000	-177,000	---	---
Total, Retirement pay and medical benefits	124,272,000	134,674,000	134,674,000	134,674,000	+10,402,000	---	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with		
					FY 1991	FY 1992 Budget	House Bill
AGENCY FOR HEALTH CARE POLICY AND RESEARCH							
Health services research:							
Research	25,424,000	5,329,000	25,424,000	5,329,000	-20,095,000	---	-20,095,000
Trust funds	(1,012,000)	(1,050,000)	(1,012,000)	(1,050,000)	(+38,000)	---	(+38,000)
AIDS	10,252,000	10,800,000	10,252,000	10,800,000	+548,000	---	+548,000
Program support	2,274,000	2,330,000	2,274,000	2,330,000	+56,000	---	+56,000
Subtotal including trust funds	38,962,000	19,509,000	38,962,000	19,509,000	-19,453,000	---	-19,453,000
1% evaluation funding (non-add)	(13,444,000)	(39,544,000)	(13,444,000)	(34,544,000)	(+21,100,000)	(-5,000,000)	(+21,100,000)
Medical treatment effectiveness:							
Federal funds	57,806,000	15,824,000	57,806,000	50,824,000	-6,982,000	+35,000,000	-6,982,000
Trust funds	(4,880,000)	(36,723,000)	(4,880,000)	(6,723,000)	(+1,843,000)	(-30,000,000)	(+1,843,000)
Subtotal, Medical treatment effectiveness	62,686,000	52,547,000	62,686,000	57,547,000	-5,139,000	+5,000,000	-5,139,000
1% evaluation funding (non-add)	---	(10,400,000)	---	(15,400,000)	(+15,400,000)	(+5,000,000)	(+15,400,000)
Total, Health Care Policy and Research:							
Federal Funds	95,756,000	34,283,000	95,756,000	69,283,000	-26,473,000	+35,000,000	-26,473,000
Trust funds	(5,892,000)	(37,773,000)	(5,892,000)	(7,773,000)	(+1,881,000)	(-30,000,000)	(+1,881,000)
Total, 1% evaluation funding (non-add)	(13,444,000)	(49,944,000)	(13,444,000)	(49,944,000)	(+36,500,000)	---	(+36,500,000)
Total, Health Care Policy and Research (non-add)	(115,092,000)	(122,000,000)	(115,092,000)	(127,000,000)	(+11,908,000)	(+5,000,000)	(+11,908,000)
PHS travel reduction	---	---	-8,000,000	-8,000,000	-8,000,000	-8,000,000	---
Total, Public Health Service:							
Federal Funds	15,182,278,000	15,637,662,000	15,828,491,000	16,510,348,000	+1,328,070,000	+872,686,000	+681,857,000
Trust funds	(5,892,000)	(37,773,000)	(5,892,000)	(7,773,000)	(+1,881,000)	(-30,000,000)	(+1,881,000)

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
HEALTH CARE FINANCING ADMINISTRATION							
GRANTS TO STATES FOR MEDICAID							
Medicaid current law benefits	48,794,085,000	56,712,895,000	56,712,895,000	56,712,895,000	+7,918,810,000	---	---
State and local administration	2,760,865,000	3,186,254,000	3,186,254,000	3,186,254,000	+425,389,000	---	---
Proposed legislation	---	-91,500,000	---	---	---	+91,500,000	---
Subtotal, Medicaid program level, FY 1992	51,554,950,000	59,807,649,000	59,899,149,000	59,899,149,000	+8,344,199,000	+91,500,000	---
Less funds advanced in prior year	-10,400,000,000	-13,500,000,000	-13,500,000,000	-13,500,000,000	-3,100,000,000	---	---
Total, current request, FY 1992	41,154,950,000	46,307,649,000	46,399,149,000	46,399,149,000	+5,244,199,000	+91,500,000	---
New advance, 1st quarter, FY 1993	13,500,000,000	17,100,000,000	17,100,000,000	17,100,000,000	+3,600,000,000	---	---
PAYMENTS TO HEALTH CARE TRUST FUNDS							
Supplemental medical insurance	34,730,000,000	38,684,000,000	38,684,000,000	38,684,000,000	+3,954,000,000	---	---
Hospital insurance for uninsured	559,000,000	584,000,000	584,000,000	584,000,000	+25,000,000	---	---
Federal uninsured payment	46,000,000	37,000,000	37,000,000	37,000,000	-9,000,000	---	---
Program management	---	116,485,000	116,485,000	116,485,000	+116,485,000	---	---
Proposed legislation	---	-20,402,000	---	-20,402,000	-20,402,000	---	-20,402,000
Total, Payment to Trust Funds	35,335,000,000	39,401,083,000	39,421,485,000	39,401,083,000	+4,066,083,000	---	-20,402,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
PROGRAM MANAGEMENT							
Research, demonstration, and evaluation:							
Regular program, trust funds	(35,621,000)	(36,000,000)	(45,621,000)	(45,621,000)	(+10,000,000)	(+9,621,000)	---
Rural hospital transition demonstrations, trust funds	(24,398,000)	---	(21,000,000)	(25,000,000)	(+602,000)	(+25,000,000)	(+4,000,000)
Essential access community hospitals, trust funds.	(9,759,000)	---	(9,759,000)	(9,759,000)	---	(+9,759,000)	---
Subtotal, research, demonstration, & evaluation.	(69,778,000)	(36,000,000)	(76,380,000)	(80,380,000)	(+10,602,000)	(+44,380,000)	(+4,000,000)
Medicare Contractors (Trust Funds):							
Operating funds, current	(1,493,959,000)	(1,457,000,000)	(1,457,000,000)	(1,457,000,000)	(-36,959,000)	---	---
Contingency reserve fund	(58,210,000)	(100,000,000)	(257,000,000)	(257,000,000)	(+198,790,000)	(+157,000,000)	---
Subtotal, Contractors	(1,552,169,000)	(1,557,000,000)	(1,714,000,000)	(1,714,000,000)	(+161,831,000)	(+157,000,000)	---
State Certification:							
Medicare certification, trust funds	(159,497,000)	(160,000,000)	(160,000,000)	(160,000,000)	(+503,000)	---	---
Proposed legislation, user fees, trust funds	---	(-160,000,000)	---	(-160,000,000)	(-160,000,000)	---	(-160,000,000)
Subtotal, State certification	(159,497,000)	---	(160,000,000)	---	(-159,497,000)	---	(-160,000,000)

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Federal Administration:							
Trust funds	(301,409,000)	(333,006,000)	(331,752,000)	(226,500,000)	(-74,909,000)	(-106,506,000)	(-105,252,000)
Less current law user fees	(-248,000)	(-77,000)	(-77,000)	(-77,000)	(+171,000)	---	---
Proposed legislation, user fees, trust funds	---	(-34,902,000)	---	(-34,902,000)	(-34,902,000)	---	(-34,902,000)
Emergency fund	---	---	---	(306,804,000)	(+306,804,000)	(+306,804,000)	(+306,804,000)
Subtotal, Federal Administration	(301,161,000)	(298,027,000)	(331,675,000)	(191,521,000)	(-109,640,000)	(-106,506,000)	(-140,154,000)
Total, Program management	(2,082,605,000)	(1,891,027,000)	(2,282,055,000)	(1,985,901,000)	(-96,704,000)	(+94,874,000)	(-296,154,000)
Total, Health Care Financing Administration:							
Federal funds	89,989,950,000	102,808,732,000	102,920,634,000	102,900,232,000	+12,910,282,000	+91,500,000	-20,402,000
Current year, FY 1992	(76,489,950,000)	(85,708,732,000)	(85,820,634,000)	(85,800,232,000)	(+9,310,282,000)	(+91,500,000)	(-20,402,000)
New advance, 1st quarter, FY 1993	(13,500,000,000)	(17,100,000,000)	(17,100,000,000)	(17,100,000,000)	(+3,600,000,000)	---	---
Trust funds	(2,082,605,000)	(1,891,027,000)	(2,282,055,000)	(1,985,901,000)	(-96,704,000)	(+94,874,000)	(-296,154,000)

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
SOCIAL SECURITY ADMINISTRATION							
PAYMENTS TO SOCIAL SECURITY TRUST FUNDS	46,958,000	40,968,000	40,968,000	40,968,000	-5,990,000	---	---
SPECIAL BENEFITS FOR DISABLED COAL MINERS							
Benefit payments	837,511,000	813,000,000	813,000,000	813,000,000	-24,511,000	---	---
Administration	7,081,000	7,336,000	7,336,000	7,336,000	+255,000	---	---
Subtotal, Black Lung, FY 1992 program level	844,592,000	820,336,000	820,336,000	820,336,000	-24,256,000	---	---
Less funds advanced in prior year	-215,000,000	-203,000,000	-203,000,000	-203,000,000	+12,000,000	---	---
Total, Black Lung, current request, FY 1992	629,592,000	617,336,000	617,336,000	617,336,000	-12,256,000	---	---
New advance, 1st quarter, FY 1993	203,000,000	198,000,000	198,000,000	198,000,000	-5,000,000	---	---
SUPPLEMENTAL SECURITY INCOME							
Federal benefit payments	16,184,751,000	16,105,000,000	16,105,000,000	16,105,000,000	-79,751,000	---	---
Beneficiary services	32,517,000	39,100,000	39,100,000	39,100,000	+6,583,000	---	---
Research demonstration	8,275,000	11,000,000	11,000,000	14,000,000	+5,725,000	+3,000,000	+3,000,000
Administration	1,183,378,000	1,321,391,000	1,321,391,000	1,321,391,000	+138,013,000	---	---
Zebley administration	232,000,000	---	---	---	-232,000,000	---	---
Subtotal, SSI FY 1992 program level	17,640,921,000	17,476,491,000	17,476,491,000	17,479,491,000	-161,430,000	+3,000,000	+3,000,000
Less funds advanced in prior year	-3,157,000,000	-3,550,000,000	-3,550,000,000	-3,550,000,000	-393,000,000	---	---
Total, SSI, current request, FY 1992	14,483,921,000	13,926,491,000	13,926,491,000	13,929,491,000	-554,430,000	+3,000,000	+3,000,000
New advance, 1st quarter, FY 1993	3,550,000,000	5,240,000,000	5,240,000,000	5,240,000,000	+1,690,000,000	---	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
LIMITATION ON ADMINISTRATIVE EXPENSES (Trust Funds)...	(3,557,159,000)	(3,884,000,000)	(3,934,000,000)	(3,794,000,000)	(+236,841,000)	(-90,000,000)	(-140,000,000)
Zebley administration	(232,000,000)	---	---	---	(-232,000,000)	---	---
Portion treated as budget authority	(600,150,000)	(648,000,000)	(648,000,000)	(648,000,000)	(+47,850,000)	---	---
(Contingency reserve, non-add)	(46,385,000)	(50,000,000)	(100,000,000)	(50,000,000)	(+3,615,000)	---	(-50,000,000)
Subtotal, LAE	(4,389,309,000)	(4,532,000,000)	(4,582,000,000)	(4,442,000,000)	(+52,691,000)	(-90,000,000)	(-140,000,000)
Total, Social Security Administration:							
Federal funds	18,913,471,000	20,022,795,000	20,022,795,000	20,025,795,000	+1,112,324,000	+3,000,000	+3,000,000
Current year FY 1992	(15,160,471,000)	(14,584,795,000)	(14,584,795,000)	(14,587,795,000)	(-572,676,000)	(+3,000,000)	(+3,000,000)
New advances, 1st quarter FY 1993	(3,753,000,000)	(5,438,000,000)	(5,438,000,000)	(5,438,000,000)	(+1,685,000,000)	---	---
Trust funds	(4,389,309,000)	(4,532,000,000)	(4,582,000,000)	(4,442,000,000)	(+52,691,000)	(-90,000,000)	(-140,000,000)

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
ADMINISTRATION FOR CHILDREN AND FAMILIES							
FAMILY SUPPORT PAYMENTS TO STATES							
Aid to Families with Dependent Children (AFDC)........	11,296,000,000	12,135,000,000	12,135,000,000	12,135,000,000	+839,000,000	---	---
Payments to territories...............................	16,346,000	16,346,000	16,346,000	16,346,000	---	---	---
Emergency assistance..................................	191,600,000	176,900,000	176,900,000	176,900,000	-14,700,000	---	---
Repatriation..	5,000,000	1,000,000	1,000,000	1,000,000	-4,000,000	---	---
State and local welfare administration................	1,448,200,000	1,512,800,000	1,512,800,000	1,512,800,000	+64,600,000	---	---
Work activities / child care..........................	317,000,000	433,000,000	433,000,000	433,000,000	+116,000,000	---	---
At risk child care....................................	150,000,000	300,000,000	300,000,000	300,000,000	+150,000,000	---	---
Proposed regulatory savings...........................	---	-38,900,000	-38,900,000	---	---	+38,900,000	+38,900,000
Subtotal, Welfare payments....................	13,424,146,000	14,536,146,000	14,536,146,000	14,575,046,000	+1,150,900,000	+38,900,000	+38,900,000
Child Support Enforcement:							
State and local administration....................	1,181,000,000	1,309,000,000	1,309,000,000	1,309,000,000	+128,000,000	---	---
Federal incentive payments........................	296,000,000	332,000,000	332,000,000	332,000,000	+36,000,000	---	---
Less federal share collections....................	-906,000,000	-1,015,000,000	-1,015,000,000	-1,015,000,000	-109,000,000	---	---
Subtotal, Child support.......................	571,000,000	626,000,000	626,000,000	626,000,000	+55,000,000	---	---
Total, Payments, FY 1992 program level..........	13,995,146,000	15,162,146,000	15,162,146,000	15,201,046,000	+1,205,900,000	+38,900,000	+38,900,000
Less funds advanced in previous years.........	-3,000,000,000	-3,300,000,000	-3,300,000,000	-3,300,000,000	-300,000,000	---	---
Total, Payments, current request, FY 1992.......	10,995,146,000	11,862,146,000	11,862,146,000	11,901,046,000	+905,900,000	+38,900,000	+38,900,000
New advance, 1st quarter, FY 1993...........	3,300,000,000	4,000,000,000	4,000,000,000	4,000,000,000	+700,000,000	---	---

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
PAYMENTS TO STATES FOR AFDC WORK PROGRAMS	1,000,000,000	1,000,000,000	1,000,000,000	1,000,000,000	---	---	---
ENERGY ASSISTANCE PROGRAMS							
LOW INCOME ENERGY ASSISTANCE	1,415,055,000	925,000,000	1,000,000,000	1,300,000,000	-115,055,000	+375,000,000	+300,000,000
ENERGY EMERGENCY CONTINGENCY FUND	195,180,000	100,000,000	---	---	-195,180,000	-100,000,000	---
ENERGY EMERGENCY FUND	---	---	(600,000,000)	(300,000,000)	(+300,000,000)	(+300,000,000)	(-300,000,000)
Total, Energy assistance programs	1,610,235,000	1,025,000,000	1,000,000,000	1,300,000,000	-310,235,000	+275,000,000	+300,000,000
Total including contingency	(1,610,235,000)	(1,025,000,000)	(1,600,000,000)	(1,600,000,000)	(-10,235,000)	(+575,000,000)	---
REFUGEE AND ENTRANT ASSISTANCE							
Cash and medical assistance	234,216,000	---	117,600,000	234,216,000	---	+234,216,000	+116,616,000
Social services	82,952,000	---	82,952,000	82,952,000	---	+82,952,000	---
Voluntary agency program	39,036,000	---	39,036,000	39,036,000	---	+39,036,000	---
Preventive health	5,631,000	---	5,631,000	5,631,000	---	+5,631,000	---
Targeted assistance	48,795,000	---	48,795,000	48,795,000	---	+48,795,000	---
Undistributed	---	410,630,000	---	---	---	-410,630,000	---
Total, Refugee Resettlement	410,630,000	410,630,000	294,014,000	410,630,000	---	---	+116,616,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
STATE LEGALIZATION IMPACT ASSISTANCE GRANTS							
Current year	-566,854,000	-1,122,992,000	-1,122,992,000	-1,122,992,000	-556,138,000	---	---
Advance funding	583,934,000	---	1,122,992,000	1,122,992,000	+539,058,000	+1,122,992,000	---
Total	17,080,000	-1,122,992,000	---	---	-17,080,000	+1,122,992,000	---
COMMUNITY SERVICES BLOCK GRANT							
Grants to States for Community Services	349,372,000	---	349,372,000	370,000,000	+20,628,000	+370,000,000	+20,628,000
Homeless services grants	33,181,000	---	25,000,000	30,181,000	-3,000,000	+30,181,000	+5,181,000
Discretionary funds:							
Community economic development	20,494,000	---	21,500,000	22,000,000	+1,506,000	+22,000,000	+500,000
Rural housing	4,099,000	---	4,099,000	4,099,000	---	+4,099,000	---
Farmworker assistance	3,025,000	---	3,025,000	3,025,000	---	+3,025,000	---
National youth sports	10,832,000	10,832,000	12,000,000	10,832,000	---	---	-1,168,000
Technical assistance	244,000	---	244,000	244,000	---	+244,000	---
Subtotal, discretionary funds	38,694,000	10,832,000	40,868,000	40,200,000	+1,506,000	+29,368,000	-668,000
Community Partnerships	4,050,000	---	---	4,050,000	---	+4,050,000	+4,050,000
Community Food and Nutrition	2,440,000	---	5,484,000	7,000,000	+4,560,000	+7,000,000	+1,516,000
Total, Community services	427,737,000	10,832,000	420,724,000	451,431,000	+23,694,000	+440,599,000	+30,707,000
GRANTS TO STATES FOR CHILD CARE							
Block grants to States	731,925,000	731,925,000	825,000,000	825,000,000	+93,075,000	+93,075,000	---
Rescission	-144,925,000	---	---	---	+144,925,000	---	---
Subtotal, block grants	587,000,000	731,925,000	825,000,000	825,000,000	+238,000,000	+93,075,000	---
Licensing grants to States	13,000,000	13,000,000	25,000,000	13,000,000	---	---	-12,000,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
PROGRAM ADMINISTRATION							
Federal Administration	76,093,000	81,000,000	81,000,000	76,093,000	---	-4,907,000	-4,907,000
Research & evaluation	10,735,000	6,500,000	6,500,000	13,735,000	+3,000,000	+7,235,000	+7,235,000
Total, program administration	86,828,000	87,500,000	87,500,000	89,828,000	+3,000,000	+2,328,000	+2,328,000
SOCIAL SERVICES BLOCK GRANT (TITLE XX)	2,800,000,000	2,800,000,000	2,800,000,000	2,800,000,000	---	---	---
HUMAN DEVELOPMENT SERVICES							
Programs for Children, Youth, and Families:							
Head start:							
Regular grants	1,951,800,000	2,051,800,000	1,963,800,000	1,951,800,000	---	-100,000,000	-12,000,000
Transfer from ''Educational Excellence''	---	---	(250,000,000)	(250,000,000)	(+250,000,000)	(+250,000,000)	---
Subtotal	(1,951,800,000)	(2,051,800,000)	(2,213,800,000)	(2,201,800,000)	(+250,000,000)	(+150,000,000)	(-12,000,000)
Child development associate scholarships	1,397,000	1,397,000	1,397,000	1,397,000	---	---	---
Family crisis program:							
Child abuse state grants	19,518,000	19,518,000	19,518,000	21,518,000	+2,000,000	+2,000,000	+2,000,000
Child abuse challenge grants	5,367,000	5,367,000	5,367,000	5,367,000	---	---	---
Runaway and homeless youth	35,132,000	35,132,000	35,132,000	36,370,000	+1,238,000	+1,238,000	+1,238,000
Family violence	10,735,000	10,735,000	10,735,000	12,235,000	+1,500,000	+1,500,000	+1,500,000
Abandoned infants assistance	12,557,000	12,557,000	12,557,000	12,557,000	---	---	---
Emergency protection grants - substance abuse.	19,518,000	19,518,000	19,518,000	19,518,000	---	---	---
Subtotal, family crisis	102,827,000	102,827,000	102,827,000	107,565,000	+4,738,000	+4,738,000	+4,738,000
Dependent care planning and development	13,175,000	13,175,000	13,175,000	13,175,000	---	---	---
Child welfare services	273,911,000	273,911,000	273,911,000	273,911,000	---	---	---
Less amounts derived by transfer	-27,352,000	---	---	---	+27,352,000	---	---
Subtotal, child welfare services	246,559,000	273,911,000	273,911,000	273,911,000	+27,352,000	---	---
Subtotal	2,315,758,000	2,443,110,000	2,355,110,000	2,347,848,000	+32,090,000	-95,262,000	-7,262,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Programs for the Aging:							
Grants to States:							
Supportive services and centers	290,818,000	290,818,000	290,818,000	324,000,000	+33,182,000	+33,182,000	+33,182,000
Ombudsman activities	5,367,000	5,367,000	5,367,000	11,367,000	+6,000,000	+6,000,000	+6,000,000
Nutrition:							
Congregate meals	361,083,000	361,083,000	361,083,000	373,000,000	+11,917,000	+11,917,000	+11,917,000
Home-delivered meals	87,831,000	87,831,000	87,831,000	91,831,000	+4,000,000	+4,000,000	+4,000,000
Federal Council on Aging	181,000	181,000	181,000	181,000	---	---	---
Grants to Indians	14,639,000	14,639,000	14,639,000	15,224,000	+585,000	+585,000	+585,000
Frail elderly in-home services	6,831,000	6,831,000	6,831,000	7,000,000	+169,000	+169,000	+169,000
Subtotal, Aging programs	766,750,000	766,750,000	766,750,000	822,603,000	+55,853,000	+55,853,000	+55,853,000
Developmental disabilities program:							
State grants	64,409,000	64,409,000	64,409,000	71,773,000	+7,364,000	+7,364,000	+7,364,000
Protection and advocacy	20,982,000	20,982,000	20,982,000	24,080,000	+3,098,000	+3,098,000	+3,098,000
Subtotal, Developmental disabilities	85,391,000	85,391,000	85,391,000	95,853,000	+10,462,000	+10,462,000	+10,462,000
Native American Programs	33,376,000	33,376,000	33,376,000	34,376,000	+1,000,000	+1,000,000	+1,000,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Human services research, training & demonstration:							
Comprehensive child development centers...........	24,398,000	24,398,000	45,000,000	24,398,000	---	---	-20,602,000
Transfer from "Educational excellence"............	---	---	---	(20,000,000)	(+20,000,000)	(+20,000,000)	(+20,000,000)
Subtotal, Comprehensive Child Development...	(24,398,000)	(24,398,000)	(45,000,000)	(44,398,000)	(+20,000,000)	(+20,000,000)	(-602,000)
Child abuse discretionary activities..............	14,639,000	14,638,000	14,639,000	14,639,000	---	+1,000	---
Runaway youth - transitional living...............	9,939,000	9,939,000	12,000,000	12,000,000	+2,061,000	+2,061,000	---
Runaway youth activities - drugs..................	14,786,000	14,786,000	14,786,000	15,786,000	+1,000,000	+1,000,000	+1,000,000
Youth gang substance abuse........................	14,786,000	14,786,000	7,100,000	14,786,000	---	---	+7,686,000
Temporary childcare/crisis nurseries..............	11,055,000	11,055,000	11,055,000	11,055,000	---	---	---
Child welfare training............................	3,559,000	3,559,000	3,559,000	3,559,000	---	---	---
Child welfare research............................	6,652,000	7,807,000	6,652,000	6,652,000	---	-1,155,000	---
Adoption opportunities............................	12,687,000	12,687,000	12,687,000	12,687,000	---	---	---
Aging research, training and special projects.....	26,917,000	25,941,000	25,941,000	25,941,000	-976,000	---	---
Social services research..........................	2,879,000	3,879,000	7,879,000	12,879,000	+10,000,000	+9,000,000	+5,000,000
Developmental disabilities special projects.......	3,025,000	3,025,000	3,025,000	3,325,000	+300,000	+300,000	+300,000
Developmental disabilities university affiliated programs..	13,907,000	13,907,000	15,407,000	16,407,000	+2,500,000	+2,500,000	+1,000,000
Total, Human Services Res, Trng & demonstration.	159,229,000	160,407,000	179,730,000	174,114,000	+14,885,000	+13,707,000	-5,616,000
Program direction..................................	73,906,000	88,000,000	88,000,000	79,034,000	+5,128,000	-8,966,000	-8,966,000
Total, Human Development Services...........	3,434,410,000	3,577,034,000	3,508,357,000	3,553,828,000	+119,418,000	-23,206,000	+45,471,000

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with		
					FY 1991	FY 1992 Budget	House Bill
PAYMENTS TO STATES FOR FOSTER CARE AND ADOPTION ASSISTANCE							
Foster care	1,813,186,000	2,223,668,000	2,223,668,000	2,223,668,000	+410,482,000	---	---
Adoption assistance	189,832,000	201,861,000	201,861,000	201,861,000	+12,029,000	---	---
Independent living	60,000,000	70,000,000	70,000,000	70,000,000	+10,000,000	---	---
Prior year claims	520,911,000	118,476,000	118,476,000	118,476,000	-402,435,000	---	---
Transfer to child welfare service	27,352,000	---	---	---	-27,352,000	---	---
Total, Payments to States	2,611,281,000	2,614,005,000	2,614,005,000	2,614,005,000	+2,724,000	---	---
Total, Administration for Children and Families.	27,293,347,000	27,009,080,000	28,436,746,000	28,958,768,000	+1,665,421,000	+1,949,688,000	+522,022,000
Current year	(23,554,338,000)	(23,009,080,000)	(23,313,754,000)	(23,835,776,000)	(+281,438,000)	(+826,696,000)	(+522,022,000)
FY 1993	(3,883,934,000)	(4,000,000,000)	(5,122,992,000)	(5,122,992,000)	(+1,239,058,000)	(+1,122,992,000)	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
OFFICE OF THE SECRETARY							
GENERAL DEPARTMENTAL MANAGEMENT:							
Federal funds	78,944,000	91,673,000	86,673,000	79,444,000	+500,000	-12,229,000	-7,229,000
Trust funds	(22,451,000)	(22,786,000)	(19,111,000)	(22,451,000)	---	(-335,000)	(+3,340,000)
Portion treated as budget authority	(7,899,000)	(8,215,000)	(6,890,000)	(7,899,000)	---	(-316,000)	(+1,009,000)
Total, Departmental management	109,294,000	122,674,000	112,674,000	109,794,000	+500,000	-12,880,000	-2,880,000
OFFICE OF THE INSPECTOR GENERAL:							
Federal funds	51,918,000	63,842,000	63,842,000	63,842,000	+11,924,000	---	---
Trust funds	(19,202,000)	(20,476,000)	(16,363,000)	(16,363,000)	(-2,839,000)	(-4,113,000)	---
Portion treated as budget authority	(23,467,000)	(26,871,000)	(21,470,000)	(21,470,000)	(-1,997,000)	(-5,401,000)	---
Total, Inspector General	94,587,000	111,189,000	101,675,000	101,675,000	+7,088,000	-9,514,000	---
OFFICE FOR CIVIL RIGHTS:							
Federal funds	17,066,000	18,524,000	18,524,000	18,524,000	+1,458,000	---	---
Trust funds	(97,000)	(99,000)	(99,000)	(99,000)	(+2,000)	---	---
Portion treated as budget authority	(3,807,000)	(3,901,000)	(3,901,000)	(3,901,000)	(+94,000)	---	---
Total, Civil Rights	20,970,000	22,524,000	22,524,000	22,524,000	+1,554,000	---	---
POLICY RESEARCH	8,928,000	5,037,000	5,037,000	5,037,000	-3,891,000	---	---
Total, Office of the Secretary:							
Federal funds	156,856,000	179,076,000	174,076,000	166,847,000	+9,991,000	-12,229,000	-7,229,000
Trust funds	(76,923,000)	(82,348,000)	(67,834,000)	(72,183,000)	(-4,740,000)	(-10,165,000)	(+4,349,000)
Total, Office of the Secretary	(233,779,000)	(261,424,000)	(241,910,000)	(239,030,000)	(+5,251,000)	(-22,394,000)	(-2,880,000)
UNDISTRIBUTED SALARIES AND EXPENSES REDUCTION	---	---	-116,000,000	---	---	---	+116,000,000
Total, Department of Health and Human Services:							
Federal Funds	151,535,902,000	165,657,345,000	167,266,742,000	168,561,990,000	+17,026,088,000	+2,904,645,000	+1,295,248,000
Current year FY 1992	(130,398,968,000)	(139,119,345,000)	(139,605,750,000)	(140,900,998,000)	(+10,502,030,000)	(+1,781,653,000)	(+1,295,248,000)
FY 1993	(21,136,934,000)	(26,538,000,000)	(27,660,992,000)	(27,660,992,000)	(+6,524,058,000)	(+1,122,992,000)	---
Trust funds	(6,554,729,000)	(6,543,148,000)	(6,937,781,000)	(6,507,857,000)	(-46,872,000)	(-35,291,000)	(-429,924,000)

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
TITLE III--DEPARTMENT OF EDUCATION							
COMPENSATORY EDUCATION FOR THE DISADVANTAGED 1/							
Grants for the Disadvantaged (Chapter 1):							
Grants to local educational agencies: 2/							
Basic grants	5,001,975,000	5,001,975,000	5,805,000,000	5,176,575,000	+174,600,000	+174,600,000	-628,425,000
Concentration grants	555,775,000	674,775,000	645,000,000	575,175,000	+19,400,000	-99,600,000	-69,825,000
Subtotal, grants to LEA's	5,557,750,000	5,676,750,000	6,450,000,000	5,751,750,000	+194,000,000	+75,000,000	-698,250,000
Capital expenses for private school children	36,108,000	36,108,000	38,000,000	42,108,000	+6,000,000	+6,000,000	+4,108,000
Even start	49,771,000	60,000,000	100,000,000	54,500,000	+4,729,000	-5,500,000	-45,500,000
State agency programs:							
Migrant	294,596,000	294,596,000	322,000,000	294,596,000	---	---	-27,404,000
Neglected and delinquent	36,108,000	36,108,000	36,000,000	36,108,000	---	---	+108,000
State administration	59,140,000	59,140,000	64,500,000	59,140,000	---	---	-5,360,000
State program improvement grants	14,785,000	30,000,000	32,250,000	18,000,000	+3,215,000	-12,000,000	-14,250,000
Evaluation and technical assistance 3/	13,175,000	17,000,000	17,000,000	13,175,000	---	-3,825,000	-3,825,000
Rural technical assistance centers 3/	4,463,000	4,463,000	5,000,000	5,000,000	+537,000	+537,000	---
Total, Chapter 1	6,065,896,000	6,214,165,000	7,064,750,000	6,274,377,000	+208,481,000	+60,212,000	-790,373,000
Migrant education:							
High school equivalency program 3/	7,807,000	8,135,000	8,500,000	8,119,000	+312,000	-16,000	-381,000
College assistance migrant program 3/	1,952,000	2,034,000	2,500,000	2,030,000	+78,000	-4,000	-470,000
Subtotal, migrant education	9,759,000	10,169,000	11,000,000	10,149,000	+390,000	-20,000	-851,000
Total, Compensatory Education programs	6,075,655,000	6,224,334,000	7,075,750,000	6,284,526,000	+208,871,000	+60,192,000	-791,224,000

1/ $200 million originally requested within this account for Choice Schools considered under the Educational Excellence account.

2/ Handicapped activities transferred to Special Education account.

3/ Current funded.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
IMPACT AID							
Maintenance and operations:							
Payments for ''a'' children	585,540,000	588,540,000	585,540,000	588,540,000	+3,000,000	---	+3,000,000
Payments for ''b'' children	136,626,000	---	136,626,000	136,626,000	---	+136,626,000	---
Payments for Federal property (Section 2)	16,590,000	16,590,000	16,590,000	16,590,000	---	---	---
Payments related to decreased activity (Sec. 3e)	1,952,000	---	---	1,952,000	---	+1,952,000	+1,952,000
Subtotal	740,708,000	605,130,000	738,756,000	743,708,000	+3,000,000	+138,578,000	+4,952,000
Disaster assistance (Section 7)	13,663,000	---	---	---	-13,663,000	---	---
Construction	26,349,000	15,000,000	26,000,000	26,000,000	-349,000	+11,000,000	---
Total, Impact aid	780,720,000	620,130,000	764,756,000	769,708,000	-11,012,000	+149,578,000	+4,952,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
SCHOOL IMPROVEMENT PROGRAMS							
Educational improvement (Chapter 2):							
State and Local Programs:							
State block grants 1/	448,914,000	448,914,000	450,000,000	450,000,000	+1,086,000	+1,086,000	---
Evaluation	976,000	---	---	---	-976,000	---	---
Subtotal	449,890,000	448,914,000	450,000,000	450,000.000	+110,000	+1,086,000	---
National programs:							
Inexpensive book distribution (RIF)	9,271,000	9,271,000	10,000,000	10,000,000	+729,000	+729,000	---
Arts in education:							
Regular program	4,392,000	4,392,000	3,700,000	3,700,000	-692,000	-692,000	---
Initial forward funding 1/	---	---	4,900,000	4,900,000	+4,900,000	+4,900,000	---
Law - related education	5,855,000	---	9,000,000	9,800,000	+3,945,000	+9,800,000	+800,000
Subtotal, National programs	19,518,000	13,663,000	27,600,000	28,400,000	+8,882,000	+14,737,000	+800,000
Total, Chapter 2	469,408,000	462,577,000	477,600,000	478,400,000	+8,992,000	+15,823,000	+800,000
Drug-free schools and communities:							
State grants 1/	497,709,000	497,709,000	497,709,000	517,617,000	+19,908,000	+19,908,000	+19,908,000
School personnel training	23,395,000	23,395,000	23,395,000	24,331,000	+936,000	+936,000	+936,000
National programs:							
Regular programs	60,914,000	60,914,000	60,914,000	63,351,000	+2,437,000	+2,437,000	+2,437,000
Emergency grants	24,331,000	49,500,000	25,000,000	30,304,000	+5,973,000	-19,196,000	+5,304,000
Subtotal, drug-free schools	606,349,000	631,518,000	607,018,000	635,603,000	+29,254,000	+4,085,000	+28,585,000
Strengthening teaching and administration:							
Eisenhower mathematics and science education State grants 1/	202,011,000	239,011,000	240,000,000	240,000,000	+37,989,000	+989,000	---
Christa McAuliffe fellowships	1,954,000	2,036,000	2,000,000	2,000,000	+46,000	-36,000	---

1/ Forward funded.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Other school improvement programs:							
Magnet schools, desegregation program.............	109,977,000	109,977,000	110,000,000	110,000,000	+23,000	+23,000	---
Education for homeless children & youth 1/ 2/.....	7,313,000	---	37,000,000	25,000,000	+17,687,000	+25,000,000	-12,000,000
Women's educational equity........................	1,995,000	500,000	2,000,000	500,000	-1,495,000	---	-1,500,000
Training and advisory services (Civil Rights IV-A)	21,329,000	21,329,000	22,000,000	22,000,000	+671,000	+671,000	---
Dropout prevention demonstrations.................	34,064,000	29,214,000	50,000,000	35,427,000	+1,363,000	+6,213,000	-14,573,000
General assistance to the Virgin Islands..........	4,366,000	4,366,000	4,500,000	4,500,000	+134,000	+134,000	---
Ellender fellowships/Close up 1/..................	4,101,000	---	4,100,000	4,500,000	+399,000	+4,500,000	+400,000
Follow through....................................	7,265,000	---	10,000,000	7,265,000	---	+7,265,000	-2,735,000
Native Hawaiian Education.........................	6,366,000	---	6,400,000	6,400,000	+34,000	+6,400,000	---
Foreign Language Assistance 1/....................	4,880,000	---	5,000,000	12,000,000	+7,120,000	+12,000,000	+7,000,000
Subtotal, other school improvement programs.....	201,656,000	165,386,000	251,000,000	227,592,000	+25,936,000	+62,206,000	-23,408,000
National writing project..........................	1,952,000	---	---	3,000,000	+1,048,000	+3,000,000	+3,000,000
School year extension study commission............	976,000	---	---	---	-976,000	---	---
Total, School improvement programs..............	1,484,306,000	1,500,528,000	1,577,618,000	1,586,595,000	+102,289,000	+86,067,000	+8,977,000
Subtotal, forward funded........................	(1,164,928,000)	(1,185,634,000)	(1,238,709,000)	(1,254,017,000)	(+89,089,000)	(+68,383,000)	(+15,308,000)

1/ Forward funded.

2/ 1992 homeless funds requested under new HUD block grant.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
EDUCATIONAL EXCELLENCE / AMERICA 2000							
Educational Excellence:							
New generation of American schools................	---	180,000,000	---	---	---	-180,000,000	---
Merit schools....................................	---	100,000,000	---	---	---	-100,000,000	---
Governors' academies for teachers.................	---	70,000,000	---	---	---	-70,000,000	---
Governors' academies for school leaders...........	---	22,500,000	---	---	---	-22,500,000	---
Assistance for parental choice programs...........	---	200,000,000	---	---	---	-200,000,000	---
Choice demonstrations of national significance....	---	30,000,000	---	---	---	-30,000,000	---
Alternative teacher and principal certification...	---	25,000,000	---	---	---	-25,000,000	---
Commission on time, study, learning, and teaching.	---	1,000,000	---	---	---	-1,000,000	---
Subtotal, Educational excellence................	---	628,500,000	---	---	---	-628,500,000	---
Vocational and Adult Education:							
Regional literacy resource centers................	---	5,000,000	---	---	---	-5,000,000	---
Literacy initiatives..............................	---	5,000,000	---	---	---	-5,000,000	---
Higher Education: Endowment grants for HBCUs.........	---	10,000,000	---	---	---	-10,000,000	---
Assessment, Statistics, Research and Improvement:							
World class standards/achievement tests...........	---	12,400,000	---	---	---	-12,400,000	---
Goals panel: National report card................	---	2,000,000	---	---	---	-2,000,000	---
America on line..................................	---	5,000,000	---	---	---	-5,000,000	---
Assessing workplace literacy skills..............	---	2,000,000	---	---	---	-2,000,000	---
Statistics: Expansion of the adult literacy survey	---	1,100,000	---	---	---	-1,100,000	---
Assessment: Preparing interim tests...............	---	5,000,000	---	---	---	-5,000,000	---
Fund for the Improvement and Reform of Schools and Teaching.......................................	---	10,700,000	---	---	---	-10,700,000	---
Subtotal, ASRI................................	---	38,200,000	---	---	---	-38,200,000	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Departmental Management: Program administration......	---	3,300,000	---	---	---	-3,300,000	---
Head start...	---	---	250,000,000	250,000,000	+250,000,000	+250,000,000	---
Community Health Centers.............................	---	---	---	55,000,000	+55,000,000	+55,000,000	+55,000,000
Comprehensive Child Development Centers..............	---	---	---	20,000,000	+20,000,000	+20,000,000	+20,000,000
Consolidated funds...................................	---	---	250,000,000	---	---	---	-250,000,000
Total, Educational excellence..................	---	690,000,000	500,000,000	325,000,000	+325,000,000	-365,000,000	-175,000,000

1/ To be made available on July 1, 1992.

BILINGUAL AND IMMIGRANT EDUCATION

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Bilingual education:							
Bilingual programs................................	121,039,000	123,814,000	171,000,000	123,814,000	+2,775,000	---	-47,186,000
Support services..................................	11,632,000	11,632,000	12,000,000	12,000,000	+368,000	+368,000	---
Training grants...................................	36,066,000	36,066,000	36,000,000	36,000,000	-66,000	-66,000	---
Immigrant education..................................	29,277,000	29,277,000	30,000,000	30,000,000	+723,000	+723,000	---
Total..	198,014,000	200,789,000	249,000,000	201,814,000	+3,800,000	+1,025,000	-47,186,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
SPECIAL EDUCATION							
State grants:							
EHA grants to States part ''b''	1,854,210,000	1,976,095,000	1,976,095,000	1,976,095,000	+121,885,000	---	---
Chapter 1 handicapped grants	148,861,000	125,661,000	135,661,000	148,861,000	---	+23,200,000	+13,200,000
Preschool grants	292,770,000	295,920,000	295,920,000	320,000,000	+27,230,000	+24,080,000	+24,080,000
Grants for infants and families	117,108,000	128,819,000	175,000,000	175,000,000	+57,892,000	+46,181,000	---
Subtotal, State grants	2,412,949,000	2,526,495,000	2,582,676,000	2,619,956,000	+207,007,000	+93,461,000	+37,280,000
Special purpose funds:							
Deaf-blindness	12,849,000	12,849,000	13,000,000	13,000,000	+151,000	+151,000	---
Severe disabilities	7,869,000	7,869,000	8,000,000	8,000,000	+131,000	+131,000	---
Serious emotional disturbance	1,952,000	1,952,000	4,000,000	4,000,000	+2,048,000	+2,048,000	---
Early childhood education	24,202,000	24,202,000	25,000,000	25,000,000	+798,000	+798,000	---
Secondary and transitional services	14,639,000	14,639,000	17,000,000	19,000,000	+4,361,000	+4,361,000	+2,000,000
Postsecondary education	8,559,000	8,559,000	9,000,000	9,000,000	+441,000	+441,000	---
Innovation and development	20,174,000	20,174,000	24,000,000	21,000,000	+826,000	+826,000	-3,000,000
Media and captioning services	16,424,000	16,424,000	17,000,000	17,000,000	+576,000	+576,000	---
Technology applications	5,593,000	5,593,000	10,000,000	10,000,000	+4,407,000	+4,407,000	---
Special studies	3,904,000	3,904,000	4,000,000	4,000,000	+96,000	+96,000	---
Personnel development	69,289,000	69,289,000	89,800,000	89,800,000	+20,511,000	+20,511,000	---
Parent training	9,759,000	9,759,000	10,200,000	12,000,000	+2,241,000	+2,241,000	+1,800,000
Clearing houses	1,525,000	1,525,000	2,000,000	2,000,000	+475,000	+475,000	---
Regional resource centers	6,620,000	6,620,000	7,000,000	7,000,000	+380,000	+380,000	---
Subtotal, Special purpose funds	203,358,000	203,358,000	240,000,000	240,800,000	+37,442,000	+37,442,000	+800,000
Total, Special education	2,616,307,000	2,729,853,000	2,822,676,000	2,860,756,000	+244,449,000	+130,903,000	+38,080,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
REHABILITATION SERVICES AND DISABILITY RESEARCH							
Vocational rehabilitation State grants:							
Grants to States	1,632,625,000	---	1,735,480,000	1,788,000,000	+155,375,000	+1,788,000,000	+52,520,000
Supported employment State grants	29,150,000	---	29,150,000	31,065,000	+1,915,000	+31,065,000	+1,915,000
Client assistance	8,310,000	---	8,310,000	9,141,000	+831,000	+9,141,000	+831,000
Subtotal, State grants	1,670,085,000	---	1,772,940,000	1,828,206,000	+158,121,000	+1,828,206,000	+55,266,000
Special purpose funds:							
Special demonstration programs	18,368,000	---	18,368,000	25,103,000	+6,735,000	+25,103,000	+6,735,000
Supported employment projects	10,023,000	---	10,023,000	10,423,000	+400,000	+10,423,000	+400,000
Recreational programs	2,617,000	---	2,617,000	2,617,000	---	+2,617,000	---
Migratory workers	1,060,000	---	1,060,000	1,060,000	---	+1,060,000	---
Projects with industry	19,445,000	---	19,445,000	20,390,000	+945,000	+20,390,000	+945,000
Helen Keller National Center	5,367,000	---	5,367,000	5,867,000	+500,000	+5,867,000	+500,000
Independent living:							
Comprehensive services	13,619,000	---	13,619,000	14,200,000	+581,000	+14,200,000	+581,000
Centers	27,579,000	---	27,579,000	29,000,000	+1,421,000	+29,000,000	+1,421,000
Services for older blind	5,914,000	---	5,914,000	6,505,000	+591,000	+6,505,000	+591,000
Protection & advocacy for severely disabled	976,000	---	976,000	1,074,000	+98,000	+1,074,000	+98,000
Subtotal, Independent living	48,088,000	---	48,088,000	50,779,000	+2,691,000	+50,779,000	+2,691,000
Training	33,353,000	---	33,353,000	36,688,000	+3,335,000	+36,688,000	+3,335,000
National Institute on Disability & Rehabilitation Research	58,924,000	---	58,924,000	61,000,000	+2,076,000	+61,000,000	+2,076,000
Technology assistance	20,982,000	27,340,000	27,340,000	28,000,000	+7,018,000	+660,000	+660,000
Evaluation	976,000	---	976,000	1,025,000	+49,000	+1,025,000	+49,000
Subtotal, Special purpose funds	219,203,000	27,340,000	225,561,000	242,952,000	+23,749,000	+215,612,000	+17,391,000
Consolidated request, new Legislation	---	1,976,040,000	---	---	---	-1,976,040,000	---
Total, Rehabilitation services	1,889,288,000	2,003,380,000	1,998,501,000	2,071,158,000	+181,870,000	+67,778,000	+72,657,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES							
AMERICAN PRINTING HOUSE FOR THE BLIND	6,136,000	6,136,000	5,500,000	6,600,000	+464,000	+464,000	+1,100,000
NATIONAL TECHNICAL INSTITUTE FOR THE DEAF:							
Operations	36,884,000	36,884,000	38,500,000	39,097,000	+2,213,000	+2,213,000	+597,000
Endowment grant	328,000	342,000	---	342,000	+14,000	---	+342,000
Subtotal, NTID	37,212,000	37,226,000	38,500,000	39,439,000	+2,227,000	+2,213,000	+939,000
GALLAUDET UNIVERSITY:							
University programs	47,623,000	47,623,000	47,623,000	50,480,000	+2,857,000	+2,857,000	+2,857,000
Computer acquisition	---	---	850,000	---	---	---	-850,000
Precollege programs 1/	21,223,000	21,223,000	21,223,000	22,560,000	+1,337,000	+1,337,000	+1,337,000
Endowment grant	976,000	1,000,000	976,000	1,000,000	+24,000	---	+24,000
Construction	2,440,000	1,000,000	2,500,000	2,500,000	+60,000	+1,500,000	---
Subtotal, Gallaudet University	72,262,000	70,846,000	73,172,000	76,540,000	+4,278,000	+5,694,000	+3,368,000
Total, Special Institutions for Disabled	115,610,000	114,208,000	117,172,000	122,579,000	+6,969,000	+8,371,000	+5,407,000

1/ Kendall Elementary and Model Secondary Schools.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
VOCATIONAL AND ADULT EDUCATION							
Vocational education:							
Basic grants	856,503,000	890,656,000	1,077,000,000	897,500,000	+40,997,000	+6,844,000	-179,500,000
Community Education Employment Centers	---	---	---	7,500,000	+7,500,000	+7,500,000	+7,500,000
Supplemental grants, equipment	---	---	100,000,000	---	---	---	-100,000,000
Community - based organizations	11,711,000	11,711,000	12,000,000	12,000,000	+289,000	+289,000	---
Consumer and homemaking education	33,352,000	---	38,000,000	33,352,000	---	+33,352,000	-4,648,000
State councils	8,783,000	8,783,000	9,000,000	9,000,000	+217,000	+217,000	---
Tech Prep	63,434,000	63,434,000	100,000,000	65,971,000	+2,537,000	+2,537,000	-34,029,000
Tribally controlled post-secondary vocational institutions	2,440,000	2,440,000	2,500,000	2,500,000	+60,000	+60,000	---
National programs:							
Research	6,831,000	10,000,000	10,000,000	10,000,000	+3,169,000	---	---
Technical assistance, sec. 404 (d)	---	---	2,000,000	---	---	---	-2,000,000
Demonstrations	12,970,000	9,000,000	12,000,000	14,000,000	+1,030,000	+5,000,000	+2,000,000
Data systems including NOICC/SOICC	4,880,000	4,880,000	5,000,000	5,000,000	+120,000	+120,000	---
Subtotal, national programs	24,681,000	23,880,000	29,000,000	29,000,000	+4,319,000	+5,120,000	---
Bilingual vocational training	2,888,000	2,888,000	3,000,000	3,000,000	+112,000	+112,000	---
Subtotal, Applied technology education	1,003,792,000	1,003,792,000	1,370,500,000	1,059,823,000	+56,031,000	+56,031,000	-310,677,000

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Adult education:							
State Programs	201,035,000	221,500,000	250,000,000	221,500,000	+20,465,000	---	-28,500,000
National programs	7,807,000	9,000,000	9,000,000	9,000,000	+1,193,000	---	---
Literacy training for homeless adults	9,759,000	---	---	9,759,000	---	+9,759,000	+9,759,000
Workplace literacy partnerships	19,251,000	19,251,000	20,000,000	19,251,000	---	---	-749,000
English literacy grants	976,000	976,000	1,000,000	1,000,000	+24,000	+24,000	---
Subtotal, adult education	238,828,000	250,727,000	280,000,000	260,510,000	+21,682,000	+9,783,000	-19,490,000
Technology education demonstrations	964,000	---	1,000,000	---	-964,000	---	-1,000,000
Commercial truck driver training	1,952,000	---	---	3,000,000	+1,048,000	+3,000,000	+3,000,000
Total, Vocational and adult education	1,245,536,000	1,254,519,000	1,651,500,000	1,323,333,000	+77,797,000	+68,814,000	-328,167,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with		
					FY 1991	FY 1992 Budget	House Bill
STUDENT FINANCIAL ASSISTANCE							
Pell Grants: Academic year 1992 - 1993 1/	4,901,946,000	5,775,121,000	5,350,000,000	5,360,000,000	+458,054,000	-415,121,000	+10,000,000
Pell Grant contingency	110,277,000	---	100,000,000	100,000,000	-10,277,000	+100,000,000	---
Prior year shortfall	362,059,000	---	---	---	-362,059,000	---	---
Presidential Scholarships, new legislation	---	170,000,000	---	---	---	-170,000,000	---
Supplemental educational opportunity grants	520,155,000	346,945,000	570,000,000	570,000,000	+49,845,000	+223,055,000	---
Work-study	594,689,000	396,615,000	595,000,000	618,476,000	+23,787,000	+221,861,000	+23,476,000
Income contingent loans	4,880,000	10,000,000	5,000,000	4,880,000	---	-5,120,000	-120,000
Perkins loans: Federal capital contributions	156,144,000	---	156,000,000	156,000,000	-144,000	+156,000,000	---
Loan cancellations	---	15,000,000	13,000,000	15,000,000	+15,000,000	---	+2,000,000
Subtotal, Perkins loans	156,144,000	15,000,000	169,000,000	171,000,000	+14,856,000	+156,000,000	+2,000,000
State student incentive grants	63,531,000	---	64,000,000	76,000,000	+12,469,000	+76,000,000	+12,000,000
Total, Student Financial Assistance 2/	6,713,681,000	6,713,681,000	6,853,000,000	6,900,356,000	+186,675,000	+186,675,000	+47,356,000
GUARANTEED STUDENT LOANS (LIQUIDATING) 3/							
Contract authority to liquidate pre-1992 loan subsidies	(4,209,818,000)	(3,025,952,000)	(3,075,711,000)	(3,075,711,000)	(-1,134,107,000)	(+49,759,000)	---
Appropriation, including shortfalls (non-add)	(5,381,422,000)	(3,055,952,000)	(3,105,711,000)	(3,105,711,000)	(-2,275,711,000)	(+49,759,000)	---

1/ 1991 includes prior year shortfall and contingency.

2/ President's budget proposes for later transmittal.

1/ Reflects legislative savings of $49,759,000 proposed for later transmittal in the Budget Request.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
GUARANTEED STUDENT LOANS PROGRAM							
Guaranteed Student Loans:							
New loan subsidies (contract authority)..........	---	2,655,636,000	2,655,636,000	2,749,121,000	+2,749,121,000	+93,485,000	+93,485,000
Mandatory admin expenses (contract authority).....	---	164,611,000	164,611,000	158,644,000	+158,644,000	-5,967,000	-5,967,000
Total 1/....................................	---	2,820,247,000	2,820,247,000	2,907,765,000	+2,907,765,000	+87,518,000	+87,518,000
GSL LOAN ADMINISTRATION............................	34,671,000	46,433,000	46,433,000	40,000,000	+5,329,000	-6,433,000	-6,433,000

1/ President's budget proposes for later transmittal.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with		
					FY 1991	FY 1992 Budget	House Bill
HIGHER EDUCATION							
Aid for institutional development:							
Strengthening institutions	87,831,000	87,831,000	90,000,000	87,831,000	---	---	-2,169,000
Strengthening historically black colleges & univ.	87,831,000	87,831,000	100,000,000	87,831,000	---	---	-12,169,000
Strengthening historically black grad institutions	11,711,000	11,711,000	12,000,000	11,711,000	---	---	-289,000
Endowment grants	17,462,000	7,462,000	7,500,000	7,500,000	-9,962,000	+38,000	---
Subtotal, Institutional development	204,835,000	194,835,000	209,500,000	194,873,000	-9,962,000	+38,000	-14,627,000
Program development:							
Fund for the Improvement of Postsec. Education	14,639,000	14,639,000	15,000,000	15,000,000	+361,000	+361,000	---
Minority science improvement	5,855,000	6,101,000	6,000,000	6,000,000	+145,000	-101,000	---
Innovative projects for community services	1,464,000	6,830,000	1,463,000	1,463,000	-1,000	-5,367,000	---
Student Literacy Corps	5,367,000	---	5,367,000	5,367,000	---	+5,367,000	---
International educ & foreign language studies:							
Domestic programs	28,670,000	28,670,000	34,000,000	30,170,000	+1,500,000	+1,500,000	-3,830,000
Overseas programs	5,855,000	5,855,000	6,000,000	6,000,000	+145,000	+145,000	---
Foreign language & area studies fellowships VI	11,342,000	11,342,000	13,000,000	13,000,000	+1,658,000	+1,658,000	---
Subtotal, International education	45,867,000	45,867,000	53,000,000	49,170,000	+3,303,000	+3,303,000	-3,830,000
Cooperative education	13,175,000	13,175,000	14,000,000	14,000,000	+825,000	+825,000	---
Law school clinical experience	5,855,000	---	8,000,000	8,000,000	+2,145,000	+8,000,000	---
Subtotal, Program development	92,222,000	86,612,000	102,830,000	99,000,000	+6,778,000	+12,388,000	-3,830,000
Construction:							
Interest subsidy grants, prior year construction	20,396,000	19,412,000	19,412,000	19,412,000	-984,000	---	---
Academic facilities	4,197,000	---	---	---	-4,197,000	---	---
Subtotal, Construction	24,593,000	19,412,000	19,412,000	19,412,000	-5,181,000	---	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Special grants:							
Assistance to Guam	488,000	---	500,000	500,000	+12,000	+500,000	---
Margaret Chase Smith Library	976,000	---	---	---	-976,000	---	---
John McCormack Institute	2,928,000	---	---	---	-2,928,000	---	---
Robert A. Taft Institute	683,000	550,000	550,000	550,000	-133,000	---	---
Magnuson Endowment	2,928,000	---	---	2,000,000	-928,000	+2,000,000	+2,000,000
Model Law Center, Seton Hall University	5,367,000	---	---	---	-5,367,000	---	---
Bethune-Cookman	---	---	300,000	300,000	+300,000	+300,000	---
Urban Community Service	---	---	---	10,000,000	+10,000,000	+10,000,000	+10,000,000
Subtotal, Undergraduate outreach	13,370,000	550,000	1,350,000	13,350,000	-20,000	+12,800,000	+12,000,000
Aid for students:							
Special programs for the disadvantaged (TRIO plus)	333,758,000	---	385,249,000	385,249,000	+51,491,000	+385,249,000	---
Consolidated undergrad outreach (proposed leg)	---	384,249,000	---	---	---	-384,249,000	---
McNair graduate outreach (proposed leg)	---	10,826,000	---	---	---	-10,826,000	---
Undergraduate scholarships:							
Byrd honors scholarships	9,271,000	9,271,000	9,271,000	9,642,000	+371,000	+371,000	+371,000
National science scholars	976,000	10,000,000	4,500,000	4,500,000	+3,524,000	-5,500,000	---
Douglas teacher scholarships	14,639,000	14,639,000	15,000,000	15,000,000	+361,000	+361,000	---
Subtotal, Undergraduate scholarships	24,886,000	33,910,000	28,771,000	29,142,000	+4,256,000	-4,768,000	+371,000
Graduate fellowships:							
Harris graduate fellowships	17,566,000	---	17,600,000	17,600,000	+34,000	+17,600,000	---
Harris public service fellowships	3,198,000	---	3,200,000	3,200,000	+2,000	+3,200,000	---
Javits fellowships	7,807,000	---	8,000,000	8,000,000	+193,000	+8,000,000	---
Graduate assistance in areas of national need	24,885,000	---	30,000,000	25,000,000	+115,000	+25,000,000	-5,000,000
Minority participation in graduate education	5,953,000	---	5,826,000	5,953,000	---	+5,953,000	+127,000
National graduate fellowships (proposed leg)	---	54,107,000	---	---	---	-54,107,000	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Subtotal, Graduate fellowships..............	59,409,000	54,107,000	64,626,000	59,753,000	+344,000	+5,646,000	-4,873,000
Veterans' education outreach......................	2,733,000	---	2,700,000	2,733,000	---	+2,733,000	+33,000
Legal training for the disadvantaged (CLEO).......	2,928,000	---	3,000,000	3,045,000	+117,000	+3,045,000	+45,000
School, college & university partnerships.........	3,904,000	---	4,000,000	4,000,000	+96,000	+4,000,000	---
Total, Higher education 1/.................	762,638,000	784,501,000	821,438,000	810,557,000	+47,919,000	+26,056,000	-10,881,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
HOWARD UNIVERSITY							
Academic program	153,515,000	153,515,000	153,515,000	158,515,000	+5,000,000	+5,000,000	+5,000,000
Endowment grant	2,928,000	4,500,000	2,928,000	4,500,000	+1,572,000	---	+1,572,000
Research	4,616,000	4,616,000	4,616,000	4,616,000	---	---	---
Howard University Hospital	28,301,000	28,301,000	28,301,000	29,500,000	+1,199,000	+1,199,000	+1,199,000
Emergency construction	5,855,000	---	23,600,000	2,000,000	-3,855,000	+2,000,000	-21,600,000
Total, Howard University	195,215,000	190,932,000	212,960,000	199,131,000	+3,916,000	+8,199,000	-13,829,000
COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS (LIQUIDATING):							
Borrowing authority	29,277,000	---	---	---	-29,277,000	---	---
Interest subsidy payments	8,449,000	3,598,000	3,598,000	3,598,000	-4,851,000	---	---
Total, College Housing Liquidating	37,726,000	3,598,000	3,598,000	3,598,000	-34,128,000	---	---
COLLEGE HOUSING AND ACADEMIC FACILITIES PROGRAM							
New loan subsidies	---	---	---	7,539,000	+7,539,000	+7,539,000	+7,539,000
Federal administration	---	---	---	566,000	+566,000	+566,000	+566,000
Total, College Housing Program	---	---	---	8,105,000	+8,105,000	+8,105,000	+8,105,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
EDUCATION RESEARCH, STATISTICS, AND IMPROVEMENT							
Research	64,714,000	74,296,000	71,000,000	71,500,000	+6,786,000	-2,796,000	+500,000
High technology demonstration program	---	---	8,000,000	---	---	---	-8,000,000
Statistics	44,313,000	51,974,000	50,000,000	44,313,000	---	-7,661,000	-5,687,000
Assessment (NAEP)	19,211,000	28,086,000	28,000,000	20,000,000	+789,000	-8,086,000	-8,000,000
Fund for Innovation in Education	27,737,000	27,737,000	19,000,000	27,737,000	---	---	+8,737,000
Fund for the Improvement and Reform of Schools and Teaching:							
Grants for schools and teachers	5,284,000	1,880,000	5,284,000	5,495,000	+211,000	+3,615,000	+211,000
Family-school partnerships	3,611,000	927,000	3,611,000	3,755,000	+144,000	+2,828,000	+144,000
Eisenhower mathematics & science educ national program	11,711,000	14,711,000	14,000,000	18,000,000	+6,289,000	+3,289,000	+4,000,000
Math Science consortium	---	---	---	15,000,000	+15,000,000	+15,000,000	+15,000,000
National Diffusion Network	14,151,000	14,151,000	14,000,000	14,700,000	+549,000	+549,000	+700,000
Blue ribbon schools	885,000	885,000	---	885,000	---	---	+885,000
Javits gifted and talented students education	9,732,000	9,732,000	9,732,000	9,732,000	---	---	---
Star schools	14,417,000	10,000,000	---	16,417,000	+2,000,000	+6,417,000	+16,417,000
Educational partnerships	4,233,000	4,233,000	4,233,000	4,233,000	---	---	---
Territorial teacher training	1,769,000	1,769,000	1,769,000	1,769,000	---	---	---
Leadership in educational administration (LEAD)	3,831,000	370,000	370,000	370,000	-3,461,000	---	---
Midcareer teacher training	987,000	---	---	987,000	---	+987,000	+987,000
National board for professional teacher standards	4,880,000	---	4,880,000	4,880,000	---	+4,880,000	---
National council on educational goals	1,952,000	---	---	---	-1,952,000	---	---
Innovations in teacher education, new legislation	---	20,000,000	---	---	---	-20,000,000	---
Total, ERSI	233,418,000	260,751,000	233,879,000	259,773,000	+26,355,000	-978,000	+25,894,000

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
LIBRARIES							
Public libraries:							
Services	83,898,000	35,000,000	83,898,000	83,898,000	---	+48,898,000	---
Construction	19,218,000	---	14,218,000	19,218,000	---	+19,218,000	+5,000,000
Interlibrary cooperation	19,908,000	---	19,908,000	19,908,000	---	+19,908,000	---
Training 1/	651,000	---	5,000,000	5,000,000	+4,349,000	+5,000,000	---
Research and demonstrations	325,000	---	325,000	325,000	---	+325,000	---
Research libraries	5,855,000	---	5,855,000	5,855,000	---	+5,855,000	---
Library literacy programs	8,163,000	---	8,163,000	8,163,000	---	+8,163,000	---
College library technology	3,904,000	---	3,904,000	6,404,000	+2,500,000	+6,404,000	+2,500,000
Foreign language materials (Title V-LSCA, VI-HEA)	976,000	---	1,476,000	976,000	---	+976,000	-500,000
Total, Libraries	142,898,000	35,000,000	142,747,000	149,747,000	+6,849,000	+114,747,000	+7,000,000
DEPARTMENTAL MANAGEMENT							
PROGRAM ADMINISTRATION	284,595,000	303,567,000	301,952,000	284,008,000	-587,000	-19,559,000	-17,944,000
OFFICE FOR CIVIL RIGHTS, SALARIES AND EXPENSES	48,405,000	56,000,000	56,000,000	51,691,000	+3,286,000	-4,309,000	-4,309,000
OFFICE OF THE INSPECTOR GENERAL, SALARIES AND EXPENSES	24,837,000	28,521,000	26,932,000	26,530,000	+1,693,000	-1,991,000	-402,000
UNDISTRIBUTED SALARIES AND EXPENSES REDUCTION	---	---	-10,000,000	---	---	---	+10,000,000
Total, Departmental management	357,837,000	388,088,000	374,884,000	362,229,000	+4,392,000	-25,859,000	-12,655,000
Total, Department of Education	22,883,520,000	26,580,972,000	28,266,159,000	27,186,730,000	+4,303,210,000	+605,758,000	-1,079,429,000
Total including Guaranteed Student Loans	(27,093,338,000)	(29,606,924,000)	(31,341,870,000)	(30,262,441,000)	(+3,169,103,000)	(+655,517,000)	(-1,079,429,000)

1/ Training funds requested under Higher Education.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

					Senate compared with		
	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	FY 1991	FY 1992 Budget	House Bill
TITLE IV - RELATED AGENCIES							
Action (Domestic Programs):							
Volunteers in Service to America:							
VISTA operations	30,287,000	35,803,000	32,693,000	34,683,000	+4,396,000	-1,120,000	+1,990,000
VISTA Literacy Corps	4,621,000	4,930,000	4,621,000	4,930,000	+309,000	---	+309,000
Student Community Service	976,000	976,000	976,000	976,000	---	---	---
Subtotal	35,884,000	41,709,000	38,290,000	40,589,000	+4,705,000	-1,120,000	+2,299,000
Special Volunteer Programs:							
Drug programs	2,191,000	1,451,000	1,000,000	1,451,000	-740,000	---	+451,000
Older Americans Volunteer Programs:							
Foster Grandparents Program	62,946,000	62,946,000	62,946,000	65,590,000	+2,644,000	+2,644,000	+2,644,000
Senior Companion Program	27,569,000	27,569,000	27,569,000	28,727,000	+1,158,000	+1,158,000	+1,158,000
Retired Senior Volunteer Program	33,425,000	33,425,000	33,425,000	34,830,000	+1,405,000	+1,405,000	+1,405,000
Subtotal, Older Volunteers	123,940,000	123,940,000	123,940,000	129,147,000	+5,207,000	+5,207,000	+5,207,000
Inspector General	976,000	1,017,000	920,000	976,000	---	-41,000	+56,000
Program Support	28,301,000	30,435,000	29,528,000	29,528,000	+1,227,000	-907,000	---
Total, Action	191,292,000	198,552,000	193,678,000	201,691,000	+10,399,000	+3,139,000	+8,013,000
Corporation for Public Broadcasting: 1/							
FY 1994 (current request)	253,309,000	260,000,000	253,309,000	284,000,000	+30,691,000	+24,000,000	+30,691,000
FY 1993 satellite replacement	65,327,000	---	---	---	-65,327,000	---	---
Subtotal, Corporation for Public Broadcasting	318,636,000	260,000,000	253,309,000	284,000,000	-34,636,000	+24,000,000	+30,691,000

1/ FY 1991 approp. adv. in FY89 is $298,870,000.
FY 1992 approp. adv. in FY90 is $327,280,000.
FY 1993 approp. adv. in FY91 is $318,636,000.

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Federal Mediation and Conciliation Service............	27,037,000	28,145,000	28,118,000	29,118,000	+2,081,000	+973,000	+1,000,000
Federal Mine Safety and Health Review Commission......	4,189,000	4,719,000	4,357,000	4,357,000	+168,000	-362,000	---
National Commission on Acquired Immune Deficiency Syndrome..	2,928,000	3,000,000	2,000,000	3,000,000	+72,000	---	+1,000,000
National Commission on Children.......................	1,073,000	---	---	750,000	-323,000	+750,000	+750,000
National Commission on Libraries and Information Science..	732,000	911,000	750,000	911,000	+179,000	---	+161,000
National Commission to Prevent Infant Mortality.......	390,000	---	390,000	440,000	+50,000	+440,000	+50,000
National Council on Disability........................	1,439,000	1,642,000	1,497,000	1,642,000	+203,000	---	+145,000
National Labor Relations Board........................	147,461,000	162,000,000	162,000,000	162,000,000	+14,539,000	---	---
National Mediation Board..............................	6,514,000	7,008,000	6,775,000	6,775,000	+261,000	-233,000	---
Occupational Safety and Health Review Commission......	6,247,000	6,711,000	6,497,000	6,497,000	+250,000	-214,000	---
Physician Payment Review Commission (trust funds).....	(3,778,000)	(4,495,000)	(4,300,000)	(4,495,000)	(+717,000)	---	(+195,000)
Prospective Payment Assessment Commission (trust funds)..	(3,875,000)	(4,210,000)	(4,030,000)	(4,030,000)	(+155,000)	(-180,000)	---

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
Railroad Retirement Board:							
Dual benefits payments account	326,927,000	315,000,000	315,000,000	319,100,000	-7,827,000	+4,100,000	+4,100,000
Interest payment	---	---	9,000,000	---	---	---	-9,000,000
Less income tax receipts on dual benefits	-16,000,000	-18,000,000	-18,000,000	-18,000,000	-2,000,000	---	---
Subtotal, dual benefits	310,927,000	297,000,000	306,000,000	301,100,000	-9,827,000	+4,100,000	-4,900,000
Federal payment to the Railroad Retirement Account	400,000	400,000	400,000	400,000	---	---	---
Limitation on administration:							
(Retirement)	(69,936,000)	(74,037,000)	(74,037,000)	(73,287,000)	(+3,351,000)	(-750,000)	(-750,000)
(Unemployment)	(15,287,000)	(17,263,000)	(17,263,000)	(17,263,000)	(+1,976,000)	---	---
Subtotal, administration	(85,223,000)	(91,300,000)	(91,300,000)	(90,550,000)	(+5,327,000)	(-750,000)	(-750,000)
(Special Management Improvement Fund)	---	(13,910,000)	(3,264,000)	(3,264,000)	(+3,264,000)	(-10,646,000)	---
Total, limitation on administration	(85,223,000)	(105,210,000)	(94,564,000)	(93,814,000)	(+8,591,000)	(-11,396,000)	(-750,000)
(Review activity)	(5,855,000)	(7,700,000)	(6,089,000)	(6,700,000)	(+845,000)	(-1,000,000)	(+611,000)
Soldiers' and Airmen's Home (trust fund limitation):							
Operation and maintenance	40,581,000	42,123,000	40,581,000	42,123,000	+1,542,000	---	+1,542,000
Capital outlay	11,223,000	4,220,000	4,220,000	4,220,000	-7,003,000	---	---
United States Institute of Peace	8,393,000	8,911,000	8,393,000	11,918,000	+3,525,000	+3,007,000	+3,525,000
United States Naval Home (trust fund limitation):							
Operation and maintenance	---	10,055,000	10,055,000	10,055,000	+10,055,000	---	---
Capital program	---	1,253,000	1,253,000	1,253,000	+1,253,000	---	---
White House Conference on Library and Information Services	488,000	---	---	---	-488,000	---	---
Total, Title IV, Related Agencies:							
Federal Funds (all years)	1,079,950,000	1,036,650,000	1,030,273,000	1,072,250,000	-7,700,000	+35,600,000	+41,977,000
Current year, FY 1992	(761,314,000)	(776,650,000)	(776,964,000)	(788,250,000)	(+26,936,000)	(+11,600,000)	(+11,286,000)
FY 1994	(318,636,000)	(260,000,000)	(253,309,000)	(284,000,000)	(-34,636,000)	(+24,000,000)	(+30,691,000)
Trust funds	(98,731,000)	(121,615,000)	(108,983,000)	(109,039,000)	(+10,308,000)	(-12,576,000)	(+56,000)

LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES

	FY 1991 Comparable	FY 1992 Budget Request	House Bill	Senate Recommendation	Senate compared with FY 1991	Senate compared with FY 1992 Budget	Senate compared with House Bill
SUMMARY							
Title I - Department of Labor:							
Federal Funds	7,541,537,000	7,336,447,000	7,435,073,000	7,500,045,000	-41,492,000	+163,598,000	+64,972,000
Trust Funds	(3,345,157,000)	(3,398,136,000)	(3,512,648,000)	(3,537,331,000)	(+192,174,000)	(+139,195,000)	(+24,683,000)
Title II - Department of Health and Human Services:							
Federal Funds (all years)	151,535,902,000	165,657,345,000	167,266,742,000	168,561,990,000	+17,026,088,000	+2,904,645,000	+1,295,248,000
Current year	(130,398,968,000)	(139,119,345,000)	(139,605,750,000)	(140,900,998,000)	(+10,502,030,000)	(+1,781,653,000)	(+1,295,248,000)
1993 advance	(21,136,934,000)	(26,538,000,000)	(27,660,992,000)	(27,660,992,000)	(+6,524,058,000)	(+1,122,992,000)	---
Trust Funds	(6,554,729,000)	(6,543,148,000)	(6,937,781,000)	(6,507,857,000)	(-46,872,000)	(-35,291,000)	(-429,924,000)
Title III - Department of Education:							
Federal Funds	22,883,520,000	26,580,972,000	28,266,159,000	27,186,730,000	+4,303,210,000	+605,758,000	-1,079,429,000
Total including Guaranteed Student Loans	(27,093,338,000)	(29,606,924,000)	(31,341,870,000)	(30,262,441,000)	(+3,169,103,000)	(+655,517,000)	(-1,079,429,000)
Title IV - Related Agencies:							
Federal Funds (all years)	1,079,950,000	1,036,650,000	1,030,273,000	1,072,250,000	-7,700,000	+35,600,000	+41,977,000
Current year	(761,314,000)	(776,650,000)	(776,964,000)	(788,250,000)	(+26,936,000)	(+11,600,000)	(+11,286,000)
1994 advance	(318,636,000)	(260,000,000)	(253,309,000)	(284,000,000)	(-34,636,000)	(+24,000,000)	(+30,691,000)
Trust Funds	(98,731,000)	(121,615,000)	(108,983,000)	(109,039,000)	(+10,308,000)	(-12,576,000)	(+56,000)
Total, all titles:							
Federal Funds (all years)	183,040,909,000	200,611,414,000	203,998,247,000	204,321,015,000	+21,280,106,000	+3,709,601,000	+322,768,000
Current year	(161,585,339,000)	(173,813,414,000)	(176,083,946,000)	(176,376,023,000)	(+14,790,684,000)	(+2,562,609,000)	(+292,077,000)
1993 advance	(21,136,934,000)	(26,538,000,000)	(27,660,992,000)	(27,660,992,000)	(+6,524,058,000)	(+1,122,992,000)	---
1994 advance	(318,636,000)	(260,000,000)	(253,309,000)	(284,000,000)	(-34,636,000)	(+24,000,000)	(+30,691,000)
Trust Funds	(9,998,617,000)	(10,062,899,000)	(10,559,412,000)	(10,154,227,000)	(+155,610,000)	(+91,328,000)	(-405,185,000)